

HC. 4644

~~21-6-1968~~

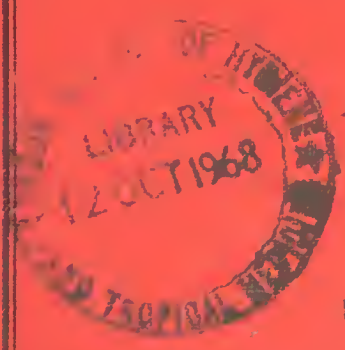
Ac 641

COUNTY OF MIDLOTHIAN
AND BURGHS OF
BONNYRIGG and LASSWADE, DALKEITH,
LOANHEAD, MUSSELBURGH, PENICUIK

ANNUAL REPORT

BY

THE MEDICAL OFFICER OF HEALTH



For the Year 1967

COUNTY OF MIDLOTHIAN
AND BURGHS OF
BONNYRIGG and LASSWADE, DALKEITH,
LOANHEAD, MUSSELBURGH, PENICUIK

ANNUAL REPORT

BY

THE MEDICAL OFFICER OF HEALTH

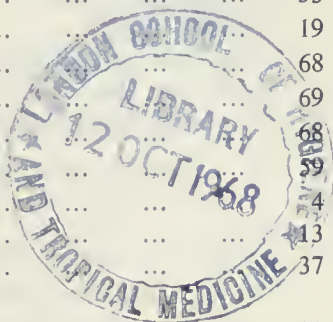
For the Year 1967

CONTENTS

	PAGE
AT RISK REGISTER	31
BACTERIOLOGICAL SERVICES	43
BIRTHS	24
BURIAL AND CREMATION	68
CHILDREN—	
Adoptions	35
Boarded-out	35
Child Life Protection Register	35
Coming into Care... ..	35
CHIROPODY	63
CLINICS—	
Ante-natal	20
Cervical Cytology... ..	20
Child Welfare	25
Family Planning	19
Post-natal	20
Psychiatric	58
General Practitioner Use	26
COMPULSORY REMOVAL	68
DENTAL SERVICES—	
Expectant Mothers	21
Pre-School Children	31
DOMESTIC HELPS	64
FACTORIES ACT	69
FOOD SUPPLY	68
HANDICAPPED PERSONS—	
Physical—Blind	51
Deaf and Dumb	53
Epileptics	54
Spastics	54
Mental—Mental Defectives	56
Mentally Ill	58
Senior Training Centres	45
Day Centre	55
Aids and Adaptations	51
HEALTH EDUCATION	36
HEALTH VISITING	35
HOMES—	
Adolescent Hostel	34
Children's	34
Convalescent	68
Family	34
Mother and Baby... ..	34

CONTENTS—*Continued*

	PAGE
Nursing ...	67
Old People ...	65
HOUSING—	
Certificates ...	70
Tuberculosis ...	42
IMMUNISATION ...	38
INFECTIOUS DISEASE—	
Food Poisoning ...	42
Tuberculosis ...	39
Venereal Disease ...	42
Other Notifiable Diseases ...	43
MEALS ON WHEELS ...	62
MIDWIFERY ...	22
NURSERIES—	
Day—Local Authority ...	33
Private ...	33
Residential ...	34
NURSING SERVICES—	
Home Nursing ...	14
Marie Curie Nurses ...	18
OCCUPATIONAL THERAPY ...	49
OLD PEOPLE ...	60
EMERGENCY ALARMS ...	65
PHYSIOTHERAPY ...	50
PORT HEALTH ...	68
PREFACE ...	6
PRE-SCHOOL CHILDREN—	
At Risk Register ...	31
Defects ...	33
Ultra-Violet Light Treatment ...	33
PROBLEM FAMILIES ...	19
PROTECTION OF PROPERTY ...	68
SANITATION ...	69
SCHOOL HEALTH ...	68
SOCIAL SERVICES ...	59
STAFF—General ...	4
Nursing ...	13
Refresher Courses ...	37
STATISTICS—	
Population ...	11
Confinements ...	22
Births ...	12
Deaths ...	11
STUDENT TRAINING—Nursing ...	15
Social Work ...	59
TUBERCULIN TESTING ...	38
VACCINATION ...	37
WELFARE FOODS ...	30



STAFF

MEDICAL OFFICER'S DEPARTMENT

JOINTLY WITH PEEBLES COUNTY COUNCIL AND SMALL BURGH AUTHORITIES

Medical Officer of Health :

JOHN RIDDELL, O.B.E., M.D., D.P.H.

Deputy Medical Officer of Health :

LEWIS F. HOWITT, M.B., Ch.B., D.P.H.

JOINTLY WITH PEEBLES COUNTY COUNCIL

Senior Assistant Medical Officer :

ANDREW F. HUTCHISON, M.B., B.S., D.T.M. & H., D.P.H.

Medical Officers :

JEANETTE B. MORRISON, L.R.C.P. & L.R.C.S. (Edin.), C.P.H.

MARGARET MCKENZIE, L.R.C.P. & L.R.C.S. (Edin.), C.P.H.

MAIRI H. LACK, M.B., Ch.B., D.P.H.

EILEEN REDDY, L.R.C.P. & L.R.C.S. (Edin.), D.P.H.

ELIZABETH M. WATSON, M.B., Ch.B., D.P.H.

BETTY EMSLIE, M.B., Ch.B.

CLAIRE KISELY, L.R.C.P. & L.R.C.S. (Edin.)

Chief Dental Officer : ROBERT P. NEILSON, O.B.E., L.D.S.

Dental Officers :

JOHN W. SWAN, L.D.S.

R. A. HODGKINS, L.D.S.

J. B. CLARK, L.D.S.

NORMAN P. THOMSON, B.D.S.

B. W. H. MACLEAN, L.D.S.

H. M. MACKINTOSH, L.D.S.

R. W. BRAZENALL, L.D.S.

*T. MACLAREN, L.D.S.

K. S. MACPHAIL, L.D.S.

F. C. ROGERS, L.D.S.

S. W. RICHARDSON, B.D.S.

† *J. C. CLARKE, L.D.S.

County Nursing Superintendent and Supervisor of Midwives :

JEAN M. TINCH, R.G.N., S.C.M., H.V., Q.N.

Deputy County Nursing Superintendent :

GEORGINA MCCANN, R.G.N., S.C.M., H.V., Q.N.

Senior Health Visitor : ROBINA CAMPBELL, R.G.N., S.C.M., H.V., Q.N.

Head Social Worker : ELIZABETH L. GILROY, M.A., A.I.M.S.W.

Mental Health Officer : WM. H. WALLACE, S.R.N., S.R.M.N.

Superintendent Physiotherapist : CHAS. A. MACMILLAN, M.C.S.P.

Administrative Officer : ROBERT FULTON, C.P.A.

* Resigned during Year † Appointed during Year

STAFF—Continued

Further Joint Staff :

Social Workers ...	2 (incl. †1)	Dental Surgery Assistants	13 (incl. *2 †2)
Dental Auxiliary ...	1 (incl. †1 *1)	Milk Officers ...	3 (incl. *1 †1)
Physiotherapists ...	6	Clerical ...	16 (incl. *5 †5)
Occupational Therapists ...	—		(incl. *4)

Consultants

Orthodontic Surgeon :

W. RUSSELL LOGAN, O.B.E., L.R.C.P. & S. (Ed.), F.D.S., H.D.D.

Ophthalmic Surgeon :

W. O. PETRIE, M.B.E., M.B., Ch.B., D.P.H., D.T.M. & H., D.O.

Dental Anaesthetist :

G. MACGREGOR ROSE, L.R.C.P., L.R.C.S.(E), L.D.S., D.A.

MIDLOTHIAN COUNTY COUNCIL

Senior Welfare Officer : RAYMOND F. BAKER

Musselburgh Day Nursery :

Matron—Mrs M. WATSON, R.G.N.

Further Midlothian Staff :

Health Visitors ...	29 (includes *2 †3)
Health Visitor—District Nursing Sister/Midwife ...	8 (includes *2 †1)
Health Visitor—District Nursing Sister ...	1
District Nursing Sister/Midwife ...	20 (includes *5 †3)
District Nursing Sisters (R.G.N.) ...	4 (includes †2)
District Nursing Sisters (S.E.N.) ...	3 (includes †1)
Health Visitor (Part-time) ...	1 (includes †1)
District Nursing Sister/Midwives (Part-time) ...	3 (includes †2)
District Nurse (R.G.N.) (Part-time) ...	7 (includes *1 †3)
District Nurse (S.E.N.) (Part-time) ...	1
Clinic Attendants ...	2

Consultants :

Orthopaedic Surgeon :

G. A. POLLOCK, M.B., Ch.B., F.R.C.S.(E.), M.S., F.A.C.S., D.P.H.

Geriatrician :

JAS. WILLIAMSON, M.B., Ch.B., F.R.C.P.(E.)

Chest Physicians :

* W. A. MURRAY, O.B.E., M.D., F.R.C.P.(E.), D.P.H.

K. MURRAY, M.B., Ch.B., M.R.C.P.(E.)

† ROSE I. L. DONALDSON, M.D.

Psychiatrist :

† T. L. PILKINGTON, M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.M. (Eng.)

* Resigned during year † Appointed during year

PREFACE

Much thought has been given during 1967 to the future of the Health and Welfare services. Following the Kilbrandon Report in 1964 the Government produced a White Paper and later a Bill entitled the Social Work (Scotland) Bill. The purpose of this was to concentrate the staff employed in social work activities even although at the same time it divorced the Social Work from the Health Services, something entirely against the obvious trends of recent years. Writing in November 1966 to the Health and Welfare Committee I concluded my Report by saying "In my opening paragraph I said that this (White) Paper might vitally affect the form of future Local Government. At the present time there are two schools of thought with regard to the Public Health service. One holds that there should be an extension of the present principle of integration of Health and Welfare, with the General Practitioner and Hospital services being included more and more. The other holds that Welfare and Health should be separated and Public Health staffs transferred to be integrated with their General Practitioner and Hospital colleagues under Area Health Boards. If Local Authorities at this stage set up Social Welfare Departments independent of the Health Departments a long step will have been taken in this latter direction." The warning went unheeded.

In due course the Royal Commission on Local Government in Scotland took evidence and the Secretary of State announced that there was to be a review of the National Health Service. The inevitable progression thus became more clear and I have no reason to change my former view. When the present public health service was first set up it was because the health and social services otherwise provided were inadequate. During the intervening years excellent work has been done and progress achieved, but now the Local Authority preventive service in its turn is not meeting the need and transfer of responsibility is again about to take place.

POPULATION

During 1967 the population of Midlothian continued to increase steadily. This was principally due to more people moving into the County as the birth rate did not increase. While the general death rate was slightly lower, the number of infant deaths increased slightly. Deaths from malignant disease tended to fall but those due to defects in the heart and circulatory systems tended to rise.

CANCER CONTROL

At the end of the year arrangements were complete for starting a series of cervical cytology clinics at various centres in the County and throughout the year normal propaganda was carried on against smoking. Cytology smears are, of course, taken for all women attending our family planning centres.

IMMUNISATION AND VACCINATION

The County maintained a very satisfactory level with 78 per cent. of children under 16 years of age being protected against smallpox.

91 per cent. against diphtheria, whooping cough and tetanus, and 91 per cent. against polio. It is interesting to note that the proportion of this protection given by general practitioners was 49 per cent. for smallpox, 37 per cent. for diphtheria, whooping cough and tetanus, and 28 per cent. for polio. No group was given special attention for immunisation against tetanus alone.

INFECTIOUS DISEASE

The incidence of infectious disease was small with no serious outbreaks. Once again, however, the tuberculosis incidence was unchanged, the further fall which we have been looking for, again not materialising. On the other hand, it was encouraging to note that only 10 per cent. of the 14 year old group skin tested were positive this year.

HEALTH EDUCATION

Considerable attention continued to be paid to this by all branches of the service and details of the talks given and numbers attending are to be found in the body of the Report. It is most unfortunate that deficiencies in staffing, particularly in the health visitor field, weaken very much our efforts in this direction. The running of training courses by the new Scottish Council for Health Education is anticipated greatly. Instruction as to how best to "put across" our message is very greatly needed.

NURSING TRAINING

In her report this year Miss Tinch has given in fairly full detail particulars of the work which we are doing in nurse training. It will be seen that this covers all branches of nursing—general, district, midwifery, and health visiting. It involves a considerable amount of work for all concerned, but we feel that it is in fact, and particularly with the general training students, an essential part of our health education programme. Field work experience can never be replaced by theoretical instruction.

FAMILY PLANNING

This is yet another of our efforts in health education. During 1967 four more Centres were opened and the response was most satisfactory. Being new centres, a large proportion of the cases were transferred from other centres, but about a quarter came from General Practitioners. Women of all ages were involved but the vast majority already had 1–3 children.

PROBLEM FAMILIES

This effort at health education was also carried a stage further in 1967 when three full-time family helps were appointed in December. The first cases tackled were in Musselburgh, Dalkeith and Gorebridge. Obviously it is too soon yet to see positive results but our hopes are high.

OLIVEBANK DAY NURSERY

In the Spring of 1967 attention was drawn to the heavy financial loss being incurred in running this nursery and it was decided as

from the beginning of September to increase the charge to 65/- per week with a more generous rebate scheme. As a result the average attendance fell from 56 to 39 of whom 18 paid the full charge. Only two cases came into the priority categories which included (a) cases where there are medical reasons affecting mother or child, (b) children with one parent and no other guardian available, (c) children from unsatisfactory housing conditions or homes where economic stress exists. Since September the numbers have again been gradually rising.

NURSERIES AND CHILD MINDERS REGULATION ACT 1948

During 1967 the number of places approved under this Act rose from 272 to 429 and applications have since been coming in steadily. As most of these are in buildings not specially designed for the purpose, and are run by persons of whom there is no standard of qualification required, it is a development which gives cause for some anxiety because of the possibilities of abuse. It is hoped that more specific control will be authorised soon. Meantime our Health Visitors and Medical Officers keep a close watch.

GENERAL PRACTICE ATTACHMENTS

This development which is receiving much publicity has been tried out experimentally with a few practices in the County. As might be expected experience shows that three requirements are essential—adequate staff, infrequent change of staff, and nurses and doctors who are keen to make this experiment work. Much more study is required before it can be accepted as the best method of providing domiciliary care.

PHYSIOTHERAPY SERVICES

The physiotherapy services provided by the County have been gradually enlarged so that not only pre-school and school children are referred, but recent fracture and cerebral accident cases are given treatment. Many of these requests come from hospital Consultants who have discharged or wish to discharge cases to homes in districts from which they cannot attend out-patient departments. While the County Council is anxious to extend this service—so much desired by General Practitioners and Consultants and of so great benefit to the patients—by an arrangement with the Regional Hospital Board such as has been made in Peeblesshire, the Regional Hospital Board has so far not agreed. The physiotherapists, while continuing to help the residents in our old people's Homes and the younger handicapped persons attending the Dalkeith pool, are also assisting increasingly with the relaxation classes carried on by the District Midwives and Health Visitors.

HANDICAPPED PERSONS

The two Training Centres at Whitehill and Wilkieston taking both mentally and physically handicapped persons, were in operation for the major part of the year and have been a tremendous success. This is largely due to the enthusiasm, skill and untiring efforts of

the Supervisors and their staffs. Extensions are urgently necessary and are having the attention of the appropriate Committees.

The occupational therapy service unfortunately by the end of the year had collapsed completely through the loss of all four of our Occupational Therapists and total failure to replace. The totally housebound have been seriously affected by this. Much was done through the supply of various items of equipment and works of adaptation to maintain handicapped persons as mobile and self supporting as possible.

Opportunity was taken during the year to send some of our handicapped persons for a holiday, fourteen trainees from Whitehill and Wilkieston going for a week to Dunbar through the co-operation of the Scottish Association for Mental Health and their Esk Valley branch, and sixteen physically handicapped for two weeks either to Kings Knoll, North Berwick, or Rosehearty Hotel, Nairn, in association with the British Red Cross Society.

During 1967 the Mental Health Officer was sent on a year's training course and this work has been shared out among the other three Social Workers. The work of this section increased considerably during the year with the referral of 234 cases.

The number of mentally handicapped persons awaiting admission to hospital increased during the year. Particularly with the younger group the Esk Valley Voluntary Association for Mental Health has been doing excellent work with the provision of day centres at Dalkeith and Pencuik.

OLD PEOPLE'S WELFARE

Considerable activity took place here by way of trying to bring together the various agencies in the County working for the benefit of old people and by the end of the year the setting up of a Midlothian Old People's Welfare Council was well under way. Luncheon Clubs and Meals on Wheels kept expanding and by the end of the year 38,668 meals had been supplied to Clubs and 78,116 through Meals on Wheels.

The number of chiropody treatments given either at Clinics, Old Folk's Homes or by domiciliary visit also increased.

Progress with the provision of additional residential accommodation for old people was very slow and the waiting list increased slightly. The first turf for the new Home at Mayfield has however now been cut and we are feeling somewhat more cheerful.

LIVINGSTON NEW TOWN

Livingston has continued to expand rapidly and the Joint Advisory Committee has had a busy year. With the appointment of Dr Duncan as Medical Adviser and various Working Parties giving close attention to the best methods of reaching our objectives, progress was steady if not spectacular. One considerable disadvantage has been the lack of the Health Centre as a focal point but this should be remedied during the current year. It will be a great relief to be able to provide at last a child health service more in line with that which we would normally have provided had suitable accommodation been available.

RESEARCH

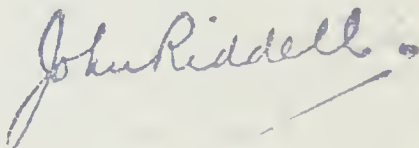
It has been realised for a considerable time that the type of work being carried out by the District Nursing Sisters has been steadily changing for various reasons. Because of this we have been keeping special records of the work done in this field since 1958, and this year following the publication of the Report on Home Nursing in Scotland by the Scottish Home and Health Department we decided to publish our own results. These were broken down into two periods 1958-61 and 1962-65 for comparative purposes. The results found were of considerable interest and after publication of the findings in "The Medical Officer" enquiries were received from various places in England and Wales.

The Department also co-operated in two National studies—The National Survey of Childhood Cancer conducted by the Department of Social Medicine, Oxford University, and the Nutrition Survey of Pre-school Children under the auspices of the Scottish Home and Health Department and Ministry of Health.

ACKNOWLEDGMENTS

In the present Report an attempt has been made to give as comprehensive a picture as possible. For this reason there are incorporated details of much work which is not the responsibility of the Health and Welfare Committee. I am, for example, indebted to Miss Sinclair, Children's Officer, for the particulars relevant to the work of the Joint Children's Committee, to the Medical Superintendents of the mental hospitals for their statistics, Dr Wilson for bacteriology, Dr Lees for venereal disease, the late Mrs Douglas Dawson for chiropody, Mrs Menzies for family planning, and to the County and Burgh Sanitary Inspectors, Heads of County Council departments, as well as Dr Howitt and Heads of Sections in the Health and Welfare department for the information supplied or collated by them.

My sincere thanks are due again to the members of the Health and Welfare Committee and the County Council for their support ; the officials of the County and Burghs ; the innumerable voluntary workers ; and finally all the members of the Health and Welfare department staff who have worked so enthusiastically and harmoniously throughout the year.

A handwritten signature in dark ink, reading "John Riddell". The signature is fluid and cursive, with a long horizontal stroke extending from the end of the name.

Medical Officer of Health.

HEALTH AND WELFARE DEPARTMENT,
10, DRUMSHEUGH GARDENS,
EDINBURGH, 3.

25th April, 1968.

VITAL STATISTICS, 1967

	Midlothian	Bonnyrigg and Lasswade	Dalkeith	Loanhead	Muskeilburgh	Penicuik	Landward
Population, Census 1961	111,968	6,333	8,865	5,020	17,272	5,823	68,655
Population, Estimated 1967 (middle)	122,908	6,782	9,246	5,830	17,178	7,775	76,097
Live Births (corrected)	2,362	98	170	111	299	182	1,542
Illegitimate Births (corrected)	110	6	3	3	26	5	67
Still Births (corrected)	38	4	7	2	5	2	18
All Deaths (corrected)	1,165	74	94	62	196	67	672
Deaths under 1 year (corrected)	46	4	5	—	8	2	27
Marriages Registered	836	87	96	31	158	53	411

CAUSES OF DEATH

Tuberculosis of respiratory system	2	—	—	—	1	—	1
Tuberculosis, other forms	—	—	—	—	—	—	—
Syphilis and its sequelae	2	—	—	—	—	—	2
Dysentery all forms	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—
Meningococcal Infections	—	—	—	—	—	—	—
Acute poliomyelitis	—	—	—	—	—	—	—
Measles	1	—	—	—	—	—	1
Other Infective and parasitic diseases	6	—	1	—	—	1	4
Malignant neoplasms of respiratory system	65	5	3	4	10	5	38
Malignant neoplasms of lymph and haemo. tissues	14	—	1	—	3	2	8
Other malignant neoplasms	141	3	16	7	28	9	78
Benign and unspecified neoplasms	2	—	—	1	—	1	—
Diabetes Mellitus	14	1	1	—	3	—	9
Anaemias	5	—	—	—	1	—	4
Other general diseases	8	—	—	1	1	—	6
Vascular lesions affecting central nervous system	196	15	11	11	41	13	105
Non-meningococcal meningitis	2	—	—	1	—	—	1
Other diseases of nervous system	12	—	1	—	1	1	9
Rheumatic fever	—	—	—	—	—	—	—
Chronic rheumatic heart disease	16	1	—	—	2	1	12
Arteriosclerotic heart disease including coro- nary	262	23	25	11	46	14	143
Degenerative heart disease	87	9	6	6	13	7	46
Other disease of heart	20	1	1	2	3	1	12
Hypertensive heart disease	20	3	3	1	4	—	9
Other hypertensive disease	4	—	—	—	1	2	1
Other circulatory disease	33	2	5	3	3	1	19
Influenza	—	—	—	—	—	—	—
Pneumonia	37	—	2	3	5	—	27
Bronchitis	55	2	6	1	10	2	34
Other respiratory disease	18	—	1	1	1	—	15
Ulcer of stomach and duodenum	6	—	1	—	—	—	5
Appendicitis	—	—	—	—	—	—	—
Intestinal obstruction and hernia	4	—	—	—	1	—	3
Gastritis and duodenitis diarrhoea (except of newborn)	4	—	—	1	—	—	3
Cirrhosis of liver	4	1	1	—	—	—	2
Other diseases of liver	5	—	—	—	1	—	4
Other digestive diseases	5	1	2	—	1	1	—
Nephritis and Nephrosis	5	—	—	—	2	—	3
Hyperplasia of prostate	2	—	—	—	—	—	2
Infections of Kidney	9	—	—	1	1	—	7
Other diseases of genito urinary system	6	—	—	1	—	1	4
Complications of pregnancy, childbirth and puerperium	—	—	—	—	—	—	—
Diseases of skin and organs of locomotion	4	—	2	—	—	1	1
Congenital malformations of nervous system and sense organs	8	—	—	1	2	—	5
Congenital malformations of circulatory system	4	1	—	—	2	—	1
Other congenital malformations	5	—	1	—	2	—	2
Birth injuries, post natal asphyxia and atelectasis	11	1	—	—	2	1	7
Infections of the newborn	2	2	—	—	—	—	—
Other diseases peculiar to early infancy	10	—	1	—	2	—	7
Senility... ..	4	—	1	2	—	—	1
Cause ill-defined and unknown	1	1	—	—	—	—	—
Motor Vehicle accidents	9	1	—	—	—	2	6
Other road transport accidents	—	—	—	—	—	—	—
Accidents in the home	14	—	1	—	1	—	12
Other violence	10	—	1	1	—	—	8
Suicide	11	1	—	2	2	1	5
All causes	1,165	74	94	62	196	67	672

BIRTH AND DEATH RATES FOR THE COUNTY
(Landward and Burghal) per 1000 population

	1967	1966	Scotland*
Birth Rate (corrected)	19.2	19.2	18.3
Death Rate, all Causes (corrected)	9.5	9.9	11.4
Death Rate, Tuberculosis (corrected)	0.02	0.02	0.03
Still-birth Rate per 1000 total Births...	16.0	17.0	15.0
Infantile Mortality Rate per 1000 live Births...	19.0	16.0	19.0

* Excluding Large Burghs

AGES AT DEATH
Number of Deaths in the various Age Groups

Years of Age	Midlothian	Bonnyrigg and Lasswade	Dalkeith	Loanhead	Musselburgh	Penicuik	Landward
Under 4 weeks	27	4	1	—	5	1	16
4 weeks—1 yr.	19	—	4	—	3	1	11
1—4	9	—	—	2	2	1	4
5—9	4	—	—	1	—	1	2
10—14	4	—	—	—	—	1	3
15—24	9	1	—	—	2	—	6
25—34	8	1	—	—	1	—	6
35—44	35	2	5	—	4	2	22
45—54	85	8	—	5	9	4	59
55—64	217	12	16	20	34	10	125
65—74	292	19	27	7	49	23	167
75—84	331	20	29	17	69	19	177
85 and over	125	7	12	10	18	4	74
Totals	1165	74	94	62	196	67	672

Infantile Mortality

Deaths classified according to age groups—

	Under 1 week	1 to 4 weeks	1 to 3 months	3 to 6 months	6 to 12 months	Total
Congenital Malformation	3	2	2	2	1	10
Pneumonia and Bronchitis	—	2	1	3	1	7
Respiratory Distress Syndrome	6	—	—	—	—	6
Prematurity	10	—	—	—	—	10
Asphyxia	—	—	—	4	1	5
Rhesus baby	2	—	—	—	—	2
Cerebral Haemorrhage	1	—	—	—	—	1
Gastro-enteritis	—	—	1	—	—	1
Septicæmia	—	—	1	—	1	2
Renal failure	—	—	—	—	1	1
Total	22	4	5	9	5	45

NURSING ESTABLISHMENT

AREA	District Nursing Sisters			Head- quarters	Health Visitors	
	Staff	Duties	Cars		Staff	Cars
County Superintendent	1 A.B.C.	1		
Deputy Superintendent	1 A.B.C.	1		
Senior Health Visitor			1	1
Addiewell: Woodmuir	1 A.B.C.	1		
West Calder	2 A.B.C.	2		
Polbeth	2 A.B.C.	2		
Livingston	2 A.B.C.	2		
East Calder	1 A.B.	1	East Calder	1 1
Pumpherstons: Mid Calder	1 A.B.	1		
Currie	2 A.B.	2	Currie	3 —
Balerno	2 A.B.C.	2		
Ratho: Newbridge	1 A.B.C.	1	Newbridge	1 1
Penicuik	2 A.B.			
			1 B.	3	Penicuik	3 —
Glencorse: Roslin: Bilston	1 A.B.	1	Roslin	1 1
					Bilston	1 1
Loanhead	1 A.B.	1	Loanhead	1 1
Lasswade and Bonnyrigg	2 A.B.	2	Bonnyrigg	1 —
Poltonhall and Polton	1 A.B.	1	Poltonhall	1 —
Rosewell	1 A.B.	1	Rosewell	1 1
Dalkeith	1 A.B.	1	Eskbank	1 1
			1 A.B.C.	1	Dalkeith	2 1
Danderhall	1 A.B.	1	Danderhall	1 1
Musselburgh: Wallyford: Whitecraig	4 A.B.		Wallyford	1 —
			2 B.	4	Musselburgh	4 1
Easthouses	2 A.B.	2	Easthouses	3 —
Newtongrange	1 A.B.	1	Newtongrange	1 —
			1 B.	1		
Gorebridge: Arniston	2 A.B.	2	Gorebridge	2 —
Gowkshill: Landward	1 A.B.C.	1		
Pathhead	1 A.B.C.	1		
Stow: Heriot	1 A.B.C.	1		
Relief Nurses	3 A.B.C.	3		
Spares		2		
			46	46	30	11

A.—Midwifery B.—General Nursing C.—Health Visiting

Miss Tinch reports : For some years a shortage of nursing staff has been reported. During 1967 the number of appointments exceeded the number of resignations, also a waiting list of nurses wishing to work in the County now exists, but there is still difficulty in maintaining the full establishment of qualified health visitors. The names on the waiting list are those of registered and enrolled nurses, some of the former also holding a midwifery certificate, who wish to work in a specific area of the County, mainly their place of residence. Most have home commitments—some wish part-time work only.

The shortage of health visitors will be resolved in due course it is hoped by recruitment of nurses for health visitor training. Five such students were recruited this year and are now training. This

will meet the known needs in 1968 but gives no margin should resignations not at present anticipated occur.

HEALTH EDUCATION

An important part of the duties of all members of nursing staff is health teaching. Throughout the year nurses have been encouraged to take and seek opportunities for such teaching. Compared with the previous year nursing staff held more sessions, the number of planned series of talks increased but the need for further expansion of such work still stands.

HEALTH VISITING

The general pattern of work has not shown any marked change, the greatest volume of effort being on the guidance of parents of young children and in the school health service.

Regular meetings to discuss questions relative to health visiting have continued throughout the year.

Closer co-operation with family doctors in some areas has resulted in referrals to health visitors of persons in a wider age range. Family doctors state their service also gains through the receipt of information from health visitors regarding families in their care.

HOME NURSING

				Cases	Visits
Under 5 years	...	...	...	104	613
5—64 years	...	...	...	703	17,596
65+ years	...	...	...	887	35,186
				<hr/>	<hr/>
Total Nursing	...	...	...	1,694	53,395
Supervision of Elderly	...	...	...	1,817	3,514
				<hr/>	<hr/>
Total Visitation	...	...	...	3,511	56,909
				<hr/>	<hr/>

The volume of work done is very similar to that in the previous year, the only change being a slight increase in the number of supervisory visits to elderly persons. This service, however, does not at present represent more than a small proportion of the work done, being on average 2—3 visits per nurse per week. It is interesting to note that it equates to the total number of visits paid to expectant mothers by the midwives on the nursing staff. Both types of visit together represent about a tenth of the total home visitation. Figures indicate that more visitation of elderly is being done in group nursing areas where there are district nurses on the staff as well as district nurse/midwives but other factors are also relevant, e.g. age structure of population.

In some areas nurses are attending patients at clinical sessions in association with family doctors. There is also a trend towards more referrals for nursing observation which shows a fuller use of nursing skills than when referrals are only made on account of need for specified nursing procedures.

In areas where active steps have been taken to promote liaison between nurses and doctors there has been an increase of work

referred. Areas where there has been a temporary shortage of staff for any reason show a decrease of referrals during and for some time following the period of shortage which indicates doctors do not refer patients if they think the nursing staff are busy and may also indicate the doctors get out of the habit of making referrals.

Organisation of nursing on a group basis is making possible a more even distribution of work and greater certainty of off duty within the group. In some areas nurses are kept busier than in others. It is doubtful if the areas where there are fewest referrals of work are those with the least illness. There are indications that the nursing areas with the greatest work load are those where nurses and doctors meet frequently but this generalisation does not hold good in every instance.

MIDWIFERY

The number of mothers being confined at home continues to decrease, 1967 showing a reduction of 78 from the previous year. In accordance with policy the number of midwives has been further reduced, but there are areas where midwives have had very few confinements during the year. There is a slight increase in the number of mothers having ante and post natal care.

STUDENT TRAINING

Hospitals have long been recognised as a suitable training field for nurses. Since a period in hospital is by no means the start and finish of an episode of illness and only a small proportion of all sick persons require hospital care, it is a limited field. Nursing is, or should be, very much more than the care of the sick in hospital. Practical experience in the Local Authority nursing service could expand the experience of the student with the advantage of giving the nurse insight into the range of normal health and the nursing of people with illness which does not require hospital treatment. In the past basic nurse training was given entirely in hospital but the General Nursing Council for Scotland recognises that some learning of normal life in the community is necessary as well as an understanding of health and welfare services. For these reasons the syllabus for registration of nurses now includes a period of three weeks with public health experience.

In regard to midwifery, domiciliary experience has long been given during training. When the Council for the Training of Health Visitors introduced a new syllabus it arranged that theory and practical work must be integrated and have equal weight thus the field work instructor came into being. The health visitor student spends approximately half her time in theoretical work, half on practical work in the community. Thus it is seen that the Local Authority nursing service does provide a certain amount of training for post-basic students. Students are accepted in the community service as in the hospital service. In some quarters there are said to be difficulties when a Local Authority nurse is accompanied by a student but this has not proved to be the case in Midlothian.

It would seem essential that the qualified nurse should be able to

nurse those in need of care wherever the need arises. Student nurses have a period of three weeks in three years in which to learn nursing as related to the home situation. In Midlothian there is a scheme whereby pupil nurses spend two days (in a period of two years of training) on district but this is an extra according to syllabus requirements. In both cases the period is brief. The initiation of district training as a post-basic course over 100 years ago shows that the defect in basic training has long been recognised. It can be said that district training remedies a shortcoming of basic training. Integration of the two during basic training would seem to be the natural solution. Integrated schemes are under discussion and it is hoped that progress will be made in the near future. Use of the Local Authority nursing service in addition to hospitals could provide an excellent training field for nurses. The nurses would emerge from training with experience of the health needs of people in relation to prevention as well as curative nursing. It is conceivable that the gap between the hospital and community services could be bridged if all nurses recognised the value of continuing service to patients in this way making the care of the patient more comprehensive.

Health Visitor Students

Four field work instructors : 4 students in current session.

In the current session there are only 4 students. This is a lower ratio than that recommended by the Council for the training of health visitors. However the primary reason is that the training school in Edinburgh from which students are placed in the County has had to restrict training places on account of a shortage of tutors. In the meantime the field work instructors are gaining experience by participation in the teaching programme though it could well be that both instructors and students lose in the resulting 1 : 1 ratio in place of the small group tutoring which is desirable.

As the placement is for a period of 9 months, there is the satisfaction of continuity. The teacher is involved in the progress and development of the student throughout her course. Students undertake case studies, projects, visits to families and individuals in addition to attending clinical sessions and health teaching sessions.

In addition, 2 health visitor students undertook the final phase of practical experience in the County. This is a period of continuous supervised practise. The student has a small case load for which she assumes responsibility under the guidance of a supervisor as required. During this period the student further develops her skills and applies her theoretical knowledge. By being placed in an area she has the advantage of becoming a member of the nursing team for the period.

Midwifery Students

Seven approved teachers : 22 students in current session.

The students are from 2 maternity hospitals. In one case, all students from the school are placed for a period of 6 weeks in the County. Members of the staff of the Health and Welfare Department give a

series of lecture/discussion sessions in the course of the students theoretical programme. There is thus a continuing contact between hospital and County staff, strengthened by meetings between all the midwives involved in the total training scheme. In the other case, only 2 students are placed in the County. This hospital draws on several counties for domiciliary experience and the administrative staff of each county participate in the total theoretical programme in turn. A full and direct link, as in the first case is satisfying ; the second arrangement certainly demonstrates to the students the variety of administration and organisation of services found in different Local Authorities.

One point of concern is the decreasing number of home confinements. However in the 6 weeks the students have opportunity to learn about people as well as of the total community health and welfare service which is for the majority a new experience, previous instruction having been mainly theoretical and related to patients in hospital . . . a very small proportion of the population.

Student Nurses

101 students.

There is now an arrangement whereby all students from one school spend 2 weeks in the County in addition to attending a week of theoretical instruction along with students from other schools in the area. The nursing superintendent holds a teaching session with the students in their classroom before and after the period on district. This serves to give practical instructions to the students as well as directing their attention to relevant factors in relation to care of the community. The second session is valuable in helping the students to relate the difference observed in different areas and explain reasons why there are apparent differences in work in some areas. Any misconceptions can be cleared. From points raised by students, it would seem that the students need a full week at least with both district nurse and health visitor but several groups have raised the point they would like to revisit the area later in training. Some have indeed revisited or telephoned nurses to find out the progress of patients, both ones nursed on district and persons discharged from hospital following the students return to ward work. It does seem that the students recognise that there are wide differences in the pattern of family living. Several have remarked that they feel a greater tolerance to patients with different cultural backgrounds which is, of course, a primary aim of the experience.

Both students and qualified staff feel they learn as a result of this scheme being in operation. In the course of a week, much can be discussed. Although the nurses enjoy having the students, this does not give as great satisfaction as the longer periods of placement.

Pupil Nurses

Sixteen students.

There is an arrangement whereby pupil nurses from one school, as an addition to their syllabus, one lecture/discussion session

(increased to two sessions in the coming year) and two days of observation of Local Authority nursing services. These students, taking a two year training for enrolment enjoy their days but it is doubtful if any lasting benefit accrues although tutors express surprise at the extent of the students' observation and comment on the way what they have learned is applied in the care of elderly patients. This is the least satisfactory from the training point of view as time is so very short. There is considerable scope for the well trained enrolled nurse in the community service. Perhaps it is here most essential that home nursing be taught in basic training. It could be done. It is being done with success in certain areas. The nursing team in a hospital ward includes students. Equally, students could gain experience working under the guidance of experienced nurses in the Local Authority nursing team.

District Nursing Training

During the year, 7 nurses on the staff have completed a course of district nursing training under the scheme whereby a course of theoretical training given by the Central Training Home of the Queen's Institute of District Nursing is combined with practical training supervised by County Nursing staff. This scheme is working satisfactorily. As a result it is possible to ensure that all nurses recruited to the staff who have not already had training in domiciliary nursing can have the additional training required.

VISITORS								
			Senior		H.V.	NM/HV.	N/M	N.
			C.N.S.	S.W.				
Student Nurses	...	...	—	—	98	3	86	12
Pupil Nurses	...	...	—	—	16	—	2	14
Pupil Midwives	...	...	—	—	—	7	15	—
Student Health Visitors	...	...	—	—	12	—	—	—
Roy. Coll. Nursing	...	...	2	2	1	1	1	—
S.H.H.D.	...	...	4	—	—	2	—	—
N.S. Department	...	...	2	2	4	1	—	—
West. Gen. Hospital	...	...	—	—	—	1	—	—

MARIE CURIE MEMORIAL FOUNDATION DAY AND NIGHT NURSING SERVICE

The County Council acts on behalf of the Foundation in the administration of the service.

Four categories of staff are employed for this service :

“A” Registered Nurses.

“B” Enrolled Nurses.

“C” Persons with Home Nursing experience.

“D” Nursing Assistants with no training.

Number on staff ... 15

Number of cases ... 8

In each case an attendant in Category “C” was provided.

During the year the County was invited to participate in a pilot

scheme whereby help could be given to long term cases where relief of relatives was a primary factor. The scheme operated to the satisfaction of the Foundation.

PROBLEM FAMILIES

On Register 1/1/67	New Cases	Off Register	Left Area	Families Broken Up	On Register 31/12/67
136	5	24	9	4	104

Health Visitors continue to pay regular visits to all families with pre-school children, but those in need of special guidance are visited more frequently. The help of social workers in relation to the social aspects of health guidance is greatly appreciated. This help takes the form of a period of casework or in some cases, discussion of the particular problems presented by the family. District nursing staff have had similar contact with social workers in respect of families and individuals.

Social Workers have paid 384 visits to these families over the past year. In some instances the Social Worker would visit at time of crisis—going in for some weeks and then withdrawing until the next difficulty arose. In other cases more regular visiting was maintained over a longer period.

Thanks must be expressed to all the associations who helped the families at Christmas time—the “Sunday Post” for parcels of groceries ; several Sunday Schools for toys ; and the Rotary and Round Table for food parcels. These brought great delights to our “Have-nots ” at Christmas.

In December 1967 a start was made to the Scheme of Family Helps. Three have been appointed in the Musselburgh, Dalkeith and Gorebridge area. It is a small beginning, but there is a lot of work attached to finding suitable families, supervision and training. Also these helps will be in a position to assess the value of their work over some months.

In the first weeks they attended part-time for training given by the Social Workers, Health Visitors and Miss Bertram of the Education Department. All the helpers are enthusiastic and we hope that this scheme may prove of lasting benefit.

FAMILY PLANNING

During 1967, four more branches of the Edinburgh Mothers’ Welfare Clinic were opened in the County, those at Musselburgh and Penicuik opening weekly and those at East and West Calder on alternate weeks. The response was most satisfactory.

	Dalkeith	Musselburgh	Penicuik	East Calder	West Calder
No. of sessions held during year... ..	49	40	38	18	19
No. of women attending ...	255	157	104	25	34
No. of women attending (medical grounds) ...	33	14	11	2	3
No. of patient visits ...	716	415	184	38	53

Source of Referral			Age at 1st Visit (excluding transferred cases)			Children Alive at 1st Visit		
Hospital	...	5	Under 20 yrs.	...	18	None	...	34
Family Doctor	...	112	20-24 yrs.	...	74	One	...	51
L.A. doctor	or	42	25-29 yrs.	...	61	Two	...	73
nurse	...	42	30-34 yrs.	...	53	Three	...	50
Clinic, patient,	or	61	35 yrs. and over	...	45	Four	...	22
friend	...	61				Five or more	...	21
Other	...	31						
Transfer from other								
clinic	...	158						
No. of cytological smears taken					...	371		

CERVICAL CYTOLOGY

Approval was given during the year by the Health and Welfare Committee to run a pilot scheme in Fisherrow Clinic, Musselburgh and this clinic will open on Tuesday, 27th, January, 1968. Depending on the success of this clinic is the expansion of this service to cover the rest of the County. In order that our Medical Officers can run these clinics each doctor has attended clinics at the Royal Infirmary and at the Western General Hospital to gain experience. Record cards have been designed in order that necessary information can be processed by the County Council computer. This service will be in addition to the Cervical Cytology at present carried out at the Family Planning Clinics.

CARE OF MOTHERS AND CHILDREN

Local Authority Ante-Natal and Post-Natal Clinics

	Addiewell	Bilston	Bonnyriggs	Dalkeith	Danderhall	Easthouses (Langlaw)	Easthouses (Mayfield)	East Calder	Loanhead	Musselburgh	Nether Currie	Newtongrange	Penicuik	Polbeth	Pumpherston	Ratho	West Calder	Total
<i>Sessions</i>																		
Held by G.P.	50	26	—	30	21	—	26	25	21	52	—	101	52	22	38	52
Held by Midwife alone	—	26	52	15	29	28	46	1	27	3	—	31	—	3	6	—
<i>Ante-natal</i>																		
1. Women attending	33	18	29	19	11	9	12	42	55	10	112	9	156	57	17	14
2. New cases in (1) above	31	14	29	12	7	3	10	42	54	10	112	9	156	54	17	14
3. Cases in (1) booked for hospital or private maternity home	24	—	2	—	3	—	—	22	21	5	96	—	109	25	5	7
<i>Post-natal</i>																		
1. Women attending	20	13	—	—	3	—	—	13	44	—	25	—	42	34	9	5
2. New cases in (1) above	14	13	—	—	3	—	—	13	44	—	25	—	42	27	9	5
3. Cases in (1) confined in hospital or private maternity home	2	—	—	—	3	—	—	—	20	—	—	—	19	—	1	31

A physiotherapist attended ante-natal relaxation classes as follows:

Currie	when	56 expectant mothers made a total of 448 attendances
Langlaw	when	33 expectant mothers made a total of 198 attendances
Bonnyrigg	when	25 expectant mothers made a total of 150 attendances
Penicuik	when	20 expectant mothers made a total of 120 attendances
Dalkeith	when	2 expectant mothers made a total of 12 attendances

Totals	...	136 expectant mothers made a total of 928 attendances
--------	-----	---

Expectant Mothers—Dental Treatment

There has been a very gradual run-down in the number of expectant mothers who have sought treatment at the Clinics since May, 1961 when entirely free treatment facilities including provision of dentures, for both Expectant and Nursing Mothers became available in the general dental practitioner service. The majority of Mothers are still biased against ante-natal dental treatment and prefer to postpone it post-natally, thus disqualifying themselves from inclusion in the County Scheme which only accepts women who are referred to the dental clinics pre-natally. Despite these unwarranted deep-rooted fallacious fears, 129 expectant mothers sought examination and treatment at the various County Treatment Centres. All required attention and, during the course of the year, 125 made 732 treatment visits. At the end of the year 92 had been made dentally fit either by conservation, extractions, provision of dentures, or a combination of all three. Completion of treatment for the remainder was carried forward into 1968.

Details of the work are set out hereunder.

Inspection

				New Cases Examined	With Dental Defects	New Cases Offered Treatment
Bonnyrigg	...	...	...	25	25	25
Currie	...	...	...	6	6	6
Dalkeith Medical Centre	...	...	...	1	1	1
Danderhall	...	...	...	6	6	6
East Calder	...	...	...	2	2	2
Easthouses—						
Bryans	...	...	...	4	4	4
Langlaw	...	...	...	1	1	1
Mayfield	...	...	...	12	12	12
Fisherrow	...	...	...	8	8	8
Gorebridge	...	...	...	5	5	5
Loanhead	...	...	...	11	11	11
Newtongrange	...	...	...	10	10	10
Penicuik—						
Bellman's Road	...	...	...	6	6	6
Eastfield	...	...	...	9	9	9
Pinkie	...	...	...	9	9	9
Polbeth	...	...	...	3	3	3
Wallyford	...	...	...	10	10	10
West Calder	...	...	...	1	1	1
Total	...			129	129	129

Treatment

Number of First Visits—Ante-natal	...	...	...	...	...	...	...	125
Number of Attendances	...	...	...	...	...	...	...	732
Fillings	...	...	...	...	...	...	...	261
Extractions	...	...	...	...	...	...	...	353
General Anaesthetics	...	...	...	...	...	...	...	20
Other Operations	...	...	...	...	...	...	...	397
Dentures—								
Fitted	...	...	...	...	...	...	...	81
Repaired	...	...	...	...	...	...	...	9
*Number of Sessions devoted to Inspection and treatment	...	...	...	...	...	...	...	754

* This figure includes the time devoted to all pre-school work because both mothers and pre-school children are, for reasons of economy, intermixed when undergoing treatment at Maternity and Child Welfare Dental Clinics.

Domiciliary Maternity Cases

Number of domiciliary confinements attended by local authority midwives under N.H.S. arrangements—

Doctor booked—present at confinement	...	...	...	...	...	...	...	131
not present at confinement	...	...	...	...	...	...	...	151
								<hr/> 282
Other confinements—								
Doctor booked—baby born before arrival of doctor or midwife								5
Doctor not booked—Doctor attended confinement alone	...							—
Doctor and midwife attended confinement								2
Midwife attended confinement alone	...							1
Baby born before arrival of doctor or midwife	...	...	...	...	...	...	...	8
								<hr/> 16
								298
Private case	...	...	...	...	...	...	...	—
								<hr/> 298

Ante-natal and Post-natal care given by local authority midwives to hospital booked cases, etc.

Ante-natal—Hospital (including private maternity home) booked cases	...	...	...	...	...	...	...	309
Domiciliary booked cases transferred to hospital care or admitted to hospital in emergency	...	...	...	...	...	...	...	102
								<hr/> 411
Post-natal—Cases delivered in hospital and attended by local authority midwives on discharge	...	...	...	...	...	...	...	169
								<hr/> 580
							1966	1967
A—Domiciliary ante-natal care—Confinement	...	...	...	...	...	...	376	298
Abortion	...	...	...	...	...	...	3	—
Miscarriage	...	...	...	...	...	...	2	3
Transfers out of area	...	...	...	...	...	...	—	11
B—Domiciliary ante-natal care—hospital confinement (emergency)							103	78
C—Domiciliary ante-natal care—case originally booked for home confinement—booking later transferred to hospital	...						17	24
D—Domiciliary ante-natal care—case booked for confinement in hospital	...	...	...	...	...	...	308	309

E—Domiciliary post-natal care—case confined in hospital	...	155	169
B as a percentage of A+B+C	...	21	19
C as a percentage of A+B+C	...	3	6
Percentage of domiciliary confinements conducted by			
midwife alone	...	49	51
Number of anaesthetists called in	...	1	1
Number of consultants called in	...	5	—
Number of maternity outfits issued	...	379	298

Reasons for transfer to hospital care:

	Emergency Admissions	Transfer to Ante-natal Care
Domestic Reasons	1	3
Abortion or Miscarriage	6	1
Premature labour	6	—
Malpresentation	8	3
Rhesus-ve	—	2
Haemorrhage (ante-partum)	10	—
Delayed labour	11	1
Toxaemia	15	3
Post maturity	10	—
Haematemesis	—	—
Multiple pregnancy	—	2
General medical condition	2	8
Hydramnios	1	—
Retained Placenta	2	—
Placenta Praevia	3	1
Post Partum Haemorrhage	1	—
Parity of Mother	2	—
	<u>78</u>	<u>24</u>

Period under Ante-natal Supervision

Type of Case	Period under Ante-natal Supervision in Weeks (L.A. Cases)									Total
	0	1-4	5-8	9-12	13-16	17-20	21-24	25-28	29-32	
<i>Domiciliary ante-natal care—</i>										
Confinement	6	8	10	26	37	54	51	49	57	298
Hospital confinement (emergency)*	—	4	7	6	16	14	9	8	14	78
Originally booked for home confinement. Booking later transferred to hospital	—	2	2	7	3	7	1	1	1	24
Hospital confinement booked	—	18	36	41	58	54	36	35	31	309

* Not booked for Hospital confinement

Rhesus, etc., Tests carried out during this Pregnancy or Earlier Pregnancy

Domiciliary Ante-natal Cases—Year 1967					
	Confined at Home	Booking Transferred to Hospital	Hospital Confinement—Emergency	Hospital Confinement—Booked	Total
Rhesus Tested	57 (8)	4 (—)	15 (1)	28 (3)	104
Rhesus Tested and also Haemoglobin Tested	188 (30)	16 (—)	53 (10)	193 (26)	450
Rhesus Tested and also W. R. or K.	—	—	—	—	—
Haemoglobin Tested only	—	—	—	1	1
Haemoglobin Tested and also W. R. or K.	—	—	—	—	—
W. R. or K.	—	—	—	—	—
	<u>245</u>	<u>20</u>	<u>68</u>	<u>222</u>	<u>555</u>
No Record of Testing	53	4	10	87	154
	<u>298</u>	<u>24</u>	<u>78</u>	<u>309</u>	<u>709</u>

Numbers in brackets are cases Rhesus negative or W. R. or K. positive

Details of analgesia, etc., administered in domiciliary cases during the year

						Doctor not Present	Doctor Present
By Midwife—							
Inhalation	...	...	...	...	...	39	19
Inhalation and Oral	...	...	...	...	...	73	67
Oral	...	...	...	...	...	11	28
						<hr/> 123	<hr/> 114
Anaesthetic given by doctor	...	...	...	...	...	—	—
Refused	...	...	...	...	...	4	2
Too late	...	...	...	...	...	16	3
Not necessary	...	...	...	...	...	22	14
						<hr/> 165	<hr/> 133

Total Local Authority domiciliary confinements—298

In the case of unmarried mothers, help is given by the Local Health Authority in approved cases to meet the cost of residence in certain nursing homes.

Births (adjusted for mother's residence)

						Live Births	Still-Births	Total
(a) Domiciliary Births	...	...	...	...	...	297	1	298
(b) Hospital Births*...	...	...	...	...	...	2051	39	2090
						<hr/> 2348	<hr/> 40	<hr/> 2388
Midlothian	—Musselburgh Maternity Hospital	...	...	...	...	154	—	154
Peeblesshire	—Peebles War Memorial Hospital	...	...	...	...	1	—	1
Edinburgh	—Eastern General Hospital	...	...	...	...	238	3	241
	Elsie Inglis Hospital	...	...	...	...	297	8	305
	Queen Mary Nursing Home	...	...	...	...	51	—	51
	Simpson Maternity Hospital	...	...	...	...	1006	21	1027
	Western General Hospital	...	...	...	...	103	3	106
E. Lothian	—Vert Hospital, Haddington	...	...	...	...	5	—	5
W. Lothian	—Bangour Hospital	...	...	...	...	186	4	190
Others	—Galashiels Hospital	...	...	...	...	5	—	5
	Stobhill, Glasgow	...	...	...	...	1	—	1
	Maryfield, Dundee	...	...	...	...	1	—	1
	Seafield, Buckie	...	...	...	...	1	—	1
	Bellshill, Glasgow	...	...	...	...	1	—	1
	Royal Maternity Glasgow	...	...	...	...	1	—	1
						<hr/> 2051	<hr/> 39	<hr/> 2090

* (There were 233 births in Musselburgh Maternity Hospital of which 79 including 1 stillbirth came from outwith Midlothian.)

Premature Births

Number of premature births, *i.e.*, where birth weight is 5 lb. 8 oz. or less (as adjusted by any notification of transfer in or out of the area).

Weight at Birth	Premature live births												Premature still births		
	Born in Hospital			Born at home or in a private maternity home											
				Nursed entirely at home or in a private maternity home				Transferred to hospital on or before 28th day							
	Total Births	Died			Total Births	Died			Total Births	Died				Born	
Within 24 hours of birth		In 1 and under 7 days	In 7 and under 28 days	Within 24 hours of birth		In 1 and under 7 days	In 7 and under 28 days	Within 24 hours of birth		In 1 and under 7 days	In 7 and under 28 days	In hospital	At home	In private maternity home	
2 lb. 3 oz. or less	8	7	—	—	—	—	—	—	—	—	—	—	3	1	—
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	5	2	—	—	—	—	—	—	—	—	—	—	11	—	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	21	3	—	—	—	—	—	—	—	—	—	—	6	—	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	21	—	—	—	—	—	—	—	—	—	—	—	3	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	66	—	1	—	4	—	—	—	1	—	—	—	1	—	—
Not weighed	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Total ...	122	13	1	—	4	—	—	—	1	—	—	—	24	1	—

Child Welfare Clinics

(A) The following Clinics were provided by the Local Authority.

1. Addiewell—Health Services Clinic, Meadowhead Place, alternate Wednesdays, 2 p.m. to 4 p.m.
2. Balerno—Balerno School, alternate Fridays, 2 p.m. to 4 p.m.
3. Bilston—Combined Purposes Clinic, Primary School, every Thursday, 2 p.m. to 4 p.m.
4. Bonnyrigg—Health Services Clinic, every Friday, 2 p.m. to 4 p.m., and alternate Fridays, 9.30 a.m. to 12 noon.
5. Currie—Riccarton Primary School, alternate Thursdays, 9.30 a.m. to 12 noon.
6. Currie—Combined Purposes Clinic, Nether Currie Primary School, every Tuesday, 2 p.m. to 4 p.m. and alternate Tuesdays, 9.30 a.m. to 12 noon.
7. Dalkeith—Medical Centre, St Andrew Street, every Friday, 2 p.m. to 4 p.m.
8. Dalkeith—Health Services Clinic, Woodburn Road, every Thursday, 2 p.m. to 4 p.m. and alternate Thursdays, 11 a.m. to 12 noon.
9. Danderhall—Combined Purposes Clinic, Danderhall School, every Wednesday, 2 p.m. to 4 p.m.

10. East Calder—Combined Purposes Clinic, Main Street, alternate Tuesdays fortnightly, 10.30 a.m. to 12 noon and four weekly, 2 p.m. to 4 p.m.
11. Easthouses—Combined Purposes Clinic, Langlaw School, every Friday, 9.30 a.m. to 12 noon.
12. Easthouses—Combined Purposes Clinic, Bryans School, every Wednesday, 9.30 a.m. to 12 noon.
13. Easthouses—Combined Purposes Clinic, Mayfield/St Luke's Primary Schools, every Thursday, 2 p.m. to 4 p.m.
14. Gorebridge—Combined Purposes Clinic, Gorebridge School, every Friday, 2 p.m. to 4 p.m.
15. Kirknewton—Kirknewton Primary School, every fourth Friday, 2 p.m. to 4 p.m.
16. Loanhead—Health Services Clinic, George Terrace, every Tuesday, 2 p.m. to 4 p.m. and every fourth Tuesday, 9.30 a.m. to 12 noon.
17. Musselburgh—Health Services Clinic, Cameron Cottage, Millhill, every Friday, 2 p.m. to 4 p.m.
18. Musselburgh—Combined Purposes Clinic, Fisherrow, every Thursday, 2 p.m. to 4 p.m. and alternate Wednesdays, 2 p.m. to 4 p.m.
19. Musselburgh—Combined Purposes Clinic, Pinkie/St Peter's School, every Thursday, 2 p.m. to 4 p.m.
20. Newbridge—Newbridge Primary School, every fourth Tuesday, 2 p.m. to 4 p.m.
21. Newtongrange—Combined Purposes Clinic, Newtongrange School, every Wednesday, 2 p.m. to 4 p.m.
22. Penicuik—Combined Purposes Clinic, Penicuik High School, every Wednesday, 2 p.m. to 4 p.m.
23. Penicuik—Combined Purposes Clinic, Eastfield School, every Tuesday, 9.30 a.m. to 12 noon.
24. Pumpherston—Combined Purposes Clinic, Pumpherston School, alternate Fridays, 9.30 a.m. to 12 noon.
25. Ratho—Combined Purposes Clinic, Ratho School, alternate Thursdays, 2 p.m. to 4 p.m.
26. Rosewell—Combined Purposes Clinic, Rosewell Primary School, alternate Fridays, 2 p.m. to 4 p.m.
27. Roslin—Combined Purposes Clinic, Roslin School, alternate Fridays, 2 p.m. to 4 p.m.
28. Wallyford—Combined Purposes Clinic, Wallyford School, every Tuesday, 2 p.m. to 4 p.m.
29. West Calder—Combined Purposes Clinic, Stewart Street, every Wednesday, 2 p.m. to 4 p.m.
30. West Calder—Health Services Clinic, Polbeth Road, Polbeth, every Wednesday, 9.30 a.m. to 12 noon.
31. Whitecraig—Combined Purposes Clinic, Whitecraig School, alternate Fridays, 2 p.m. to 4 p.m.

We are very much indebted to all the Voluntary Helpers who assist at these Clinics.

(B) No Clinics were provided by Voluntary Bodies.

(C) While many of our clinics are used by General Practitioners in association with the district midwives for ante-natal and post-natal purposes, the premises at Addiewell, Bilston, Currie (Nether Currie clinic), Dalkeith (Woodburn), Danderhall, East Calder, Polbeth, Ratho, Rosewell and West Calder are also used by general practitioners as ordinary surgeries. This is a most helpful association.

CHILD WELFARE CLINICS—1967

[illegible]

	Addiewell	Balerno	Bilston	Bonnyrigg	Currie (Riccarton)	Currie (Nether Currie)	Dalkeith (Med. Centre)	Dalkeith (Woodburn)	Danderhall	East Calder	Mayfield (Bryans)	Mayfield (Langlaw)	Mayfield	Gorebridge	Kirknewton	Loanhead	Musselburgh (Cameron Cottage)	Musselburgh (Fisherrow)	Musselburgh (Fisherrow—2)	Musselburgh (Pinkie)	Newbridge	Newtongrange	Penicuik (Bellman's Road)	Penicuik (Eastfield)	Pumpherstoun	Ratho	Rosewell	Roslin	Wallyford	West Calder	West Calder (Polbeth)	Whitcraig	Totals and Averages																														
Vaccinations and Immunisations completed—																																																															
Polio—Primary	...	36	6	69	126	19	63	42	57	47	52	24	26	26	107	7	121	40	41	9	41	21	26	120	63	26	23	16	19	49	29	45	23	1,419																													
1st Booster	...	1	2	—	—	2	2	—	1	1	—	2	2	2	—	2	1	1	2	—	1	—	1	3	4	—	8	2	1	2	4	7	2	56																													
2nd Booster	...	—	1	—	6	—	—	—	—	—	—	—	—	—	7	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	21																													
Triple Immun.—Primary	...	35	8	70	92	15	45	56	58	44	55	23	23	25	90	10	94	44	39	9	41	28	39	127	69	30	24	26	30	49	41	49	14	1,402																													
1st Booster	...	3	18	8	66	15	56	11	28	7	4	9	13	12	14	4	24	13	5	4	8	27	6	49	29	15	19	10	19	9	7	10	7	529																													
2nd Booster	...	10	15	—	2	2	17	22	9	2	4	1	2	6	—	9	7	—	3	—	1	18	6	15	4	13	18	3	5	1	—	7	—	202																													
Dip. Tet.—Primary	...	—	—	—	6	—	—	—	4	1	—	2	—	—	3	—	—	1	—	—	—	—	—	—	—	—	—	1	—	1	—	—	2	21																													
1st Booster	...	2	2	—	6	—	4	1	4	—	1	—	—	—	1	—	1	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	24																													
2nd Booster	...	1	2	—	14	—	—	1	3	—	1	7	—	—	5	3	—	5	—	2	4	7	—	1	1	—	—	—	—	4	—	10	3	75																													
Tuberculosis—Skin Tests	...	5	—	—	1	—	—	—	—	1	—	—	—	—	1	—	—	1	—	—	4	2	—	—	—	7	—	1	—	—	—	2	—	26																													
B.C.G. Vaccn.	...	—	—	—	2	9	6	1	9	15	1	2	—	4	3	—	2	1	4	—	6	2	—	—	3	2	—	1	—	7	—	—	—	80																													
Smallpox	...	27	7	82	134	47	92	47	48	38	50	25	15	32	59	7	96	49	32	15	56	25	26	112	65	33	17	14	29	31	34	47	26	1,412																													
Children referred to own doctor or for specialist treatment or advice—																																																															
Born 1967	...	4	—	—	—	14	12	8	2	6	1	2	—	5	24	—	1	—	—	1	—	1	8	1	8	—	2	1	—	1	8	10	—	120																													
1966	...	2	2	—	1	10	12	4	3	5	3	2	2	13	3	—	—	—	—	5	—	2	4	3	2	—	5	—	2	2	3	11	—	101																													
1965	...	4	—	—	—	6	5	4	—	2	—	2	2	3	—	—	1	—	—	1	—	—	—	4	1	—	2	—	—	—	—	4	—	41																													
1964	...	—	3	—	—	1	2	—	1	1	1	2	—	2	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	1	—	16																													
1963	...	—	2	—	—	7	2	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	1	—	—	—	—	15																													
1962	...	—	2	—	—	2	—	—	—	—	—	—	—	1	1	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	8																													
Sessions held by—																																																															
L.A.M.O.	...	26	23	23	77	22	69	24	38	25	26	25	25	25	49	13	37	25	24	13	23	25	25	51	25	24	27	24	18	26	26	26	26	935																													
H.V. only	...	—	—	24	—	1	5	26	27	25	—	26	26	27	4	—	26	26	27	11	24	1	26	1	26	1	1	1	1	1	26	—	24	—	413																												
In addition to the normal Child Welfare sessions, others for toddlers only were held at most centres to relieve congestion. Details are given in the following table.																																																															

In addition to the normal Child Welfare sessions, others for toddlers only were held at most centres to relieve congestion. Details are given in the following table.

SPECIAL TODDLERS CLINICS—1967

[illegible]

Welfare Foods

District	Organisation	Centres Address	Day	Hours
Addiewell	W.R.V.S.	Clinic, Meadhowhead Place	Wednesday (Fortnightly)	2-4 p.m.
Balerno	W.R.V.S.	Village Hall	Friday (4 weekly)	2.30-4 p.m.
Bilston	—	C.W.C. Primary School	Thursday	2-4 p.m.
Blackshiels	W.R.V.S.	Mrs Robertson, St Helens	Any day at house	
Bonnyrigg	—	Clinic, High Street	Friday	2-4 p.m.
		Gibson Craig Hall	(Alternate weeks)	{ 10-12 noon 2-4 p.m.
Currie	B.R.C.S.	Lanark Road West	Tuesday	2.30-4.30 p.m.
Currie	—	Clinic, Primary School	Tuesday	2-4 p.m.
Dalkeith	—	Medical Centre, St Andrew Street	Friday	2.30-4 p.m.
Dalkeith	W.R.V.S.	Clinic, Woodburn Road	Thursday	2-4 p.m.
Danderhall	W.R.V.S.	Danderhall School	Wednesday	2-4 p.m.
East Calder	W.R.I.	Clinic, Main Street	Tuesday	9.30-12 noon
			(Fortnightly)	4-weekly and 2-4 p.m.
Easthouses	W.R.V.S.	Clinic, Langlaw School	Friday	10-12 noon
Easthouses	W.R.V.S.	Clinic, Bryans School	Wednesday	10-12 noon
Easthouses	—	Clinic, Mayfield School	Thursday	2-4 p.m.
Edgehead	—	Mrs F. E. Heaphy, 58 Edgehead Rd., Chesterhill, Ford	Any day at house	
Fountainhall	—	Mrs Dick, Post Office	Daily	
Gorebridge	B.R.C.S.	Clinic, Gorebridge School	Tuesday	2-4 p.m.
Heriot	—	The Shop, near Station	Any time	2-4 p.m.
Kirknewton	—	Clinic, School	Friday (4 weekly)	2-4 p.m.
Livingston	—	Surgery, 78 Broom Walk	Tuesday	2.15-3.45 p.m.
Loanhead	W.R.V.S.	Clinic, George Terrace	Tuesday and 4 weekly	2-4 p.m. 10-12 noon and 2-4 p.m.
Middleton	—	Mrs Bennett, 1 Guildiehowes Road	Thursday (any time)	
Musselburgh	W.R.V.S.	Fisherrow Clinic	Thursday (Fortnightly)	2-4 p.m.
Musselburgh	—	Clinic, Cameron Cottage	Friday (Fortnightly)	2-4 p.m.
Musselburgh	—	Clinic, Pinkie-St Peter's School	Thursday (Fortnightly)	2-4 p.m.
Newbridge	W.R.I.	Bowling Club Pavilion	Tuesday (Fortnightly)	2.30-4 p.m.
Newtongrange	W.R.V.S.	Clinic, Newtongrange J.S. School	Wednesday	2-4 p.m.
Penicuik	W.R.V.S.	Clinic, Bellman's Road	Wednesday	2-4 p.m.
Penicuik	W.R.V.S.	Clinic, Eastfield School	Tuesday	10-12 noon
Polbeth	W.R.V.S.	Clinic, Polbeth Road	Wednesday	10-12 noon
Pumpherstoun	W.R.I.	Clinic, Pumpherstoun School	Friday (Fortnightly)	10-12 noon
Ratho	W.R.I.	Clinic, Primary School	Thursday (Fortnightly)	2-4 p.m.
Rosewell	—	Clinic, Primary School	Friday (Fortnightly)	2-4 p.m.
Roslin	W.R.I.	Clinic, Primary School	Friday (Fortnightly)	2-4 p.m.
Stow	—	Mr W. Bruce	Thursday	2-4 p.m.
Temple	—	Miss Cockburn's shop	Any day	
Wallyford	—	Clinic, Wallyford School	Tuesday (Fortnightly)	2-4 p.m.
West Calder	W.R.V.S.	Clinic, Stewart Street	Wednesday (Fortnightly)	2-4 p.m.
Whitecraig	W.R.V.S.	Clinic, Primary School	Friday (Fortnightly)	2-4 p.m.

Fortunately the voluntary workers who have given their time so generously to this purpose for many years still "carry on". Without their help we would have been in a very difficult position and we are correspondingly indebted to them. The average weekly up-take in the County during the year to 31st December, 1967 was :

National Dried Milk	...	...	349
Cod Liver Oil	...	...	79 bottles
A. and D. Vitamins	...	...	1530 tablets
Orange Juice	...	...	730 bottles

Very great attention is paid to the supervision of children who are considered to be at special risk as well as to children who have already developed a handicap in some shape or form, and they are seen regularly by both health visitors and doctors. The number of children coming into this category at the time of this report was :

Born	On " At Risk " Register	Transferred from " At Risk " to Handicapped Register during year
1967	414	—
1966	485	3
1965	313	—
1964	271	2
1963	147	—
Totals	1630	5

Pre-School Children

The system of routine dental examination and treatment of children not yet of school age has followed a similar pattern to that of previous years whereby Toddlers of $3\frac{1}{2}$ and $4\frac{1}{2}$ years of age respectively are presented at the various Clinics for a combined medical and dental "check-up". Younger children, exclusively on the medical list, may also be included by parental request. Two year old children require little, if any, dental treatment but, from past experience, over 30% of "three year olds" require some form of remedial treatment.

It is customary for parents to accompany pre-school children to the Clinics and the dental officers always grasp the opportunity of discussing with them the state of dental health of their respective children and how to maintain the children's teeth in a healthy condition. The importance of seeking early advice is also emphasised to ensure that when some treatment is required, dental decay can be arrested or eradicated in its early stages by simple and painless conservation.

The true value of this optional clinic "check-up" is that parents invariably respond to an official clinic appointment whereas, if the initiative is left to themselves, few would seek examination until obliged to do so by the intervention of pain.

Throughout the year, 2931 pre-school children were examined by the dental officers, 1560 (53.22%) showed some form of dental defect, and 1199 (76.86%) of the "defects" were offered treatment. Only 40 children attended as "casuals" leaving 2891 who sought dental examination following receipt of an official clinic "check up" appointment. By the end of the year, 1156 children had made 2494 treatment attendances at the clinics and 1008 had been made dentally fit. Continuation of treatment for the remainder was carried forward to 1968.

The age distribution of children and respective percentages inspected and offered treatment is shown hereunder and the corresponding figures for the previous year are bracketed.

Dental Examination		Examined		With Dental Defects		" Defects " Offered Treatment	
Children	Age 2 years	316	10.78% (10.8%)	79	25.0% (31.0%)	63	79.8% (81.0%)
	3 years	1057	36.06% (40.3%)	514	48.6% (46.5%)	418	81.3% (80.4%)
	4 years	1558	53.16% (48.9%)	967	62.1% (64.7%)	718	74.3% (81.6%)
Totals		2931	(3000)	1560	53.2% (53.7%)	1199	76.9% (81.1%)

Dental Treatment

First Visits	...	...	...	...	1156	(1108)
Attendances	...	...	...	...	2494	(2374)
Fillings	...	...	...	...	1124	(1068)
Extractions	...	...	...	...	1995	(1859)
General Anaesthetics	...	...	...	...	470	(464)
Other Operations	...	...	...	...	1635	(1248)

Detailed Distribution of Cases

Centre	Age	Number Examined				With Defects				Offered Treatment			
		2	3	4	Total	2	3	4	Total	2	3	4	Total
Bilston	...	6	32	62	100	1	5	33	39	1	4	20	25
Bonnyrigg	...	14	110	156	280	1	44	77	122	1	26	57	84
Currie	...	91	132	144	367	8	36	75	119	8	32	65	105
Dalkeith													
Med. Centre	18	106	134	258		6	50	91	147	2	38	61	101
Danderhall	...	20	61	58	139	4	39	35	78	4	36	26	66
East Calder	...	24	58	49	131	10	38	35	83	8	32	33	73
Easthouses—													
Bryans	...	1	12	68	81	—	8	47	55	—	7	39	46
Langlaw	...	1	11	44	56	1	6	30	37	1	4	22	27
Mayfield	...	1	9	57	67	1	9	39	49	1	9	29	39
Fisherrow	...	21	86	103	210	12	45	77	134	8	40	56	104
Gorebridge	...	7	117	121	245	4	60	65	129	3	48	43	94
Loanhead	...	8	31	64	103	5	12	45	62	5	11	39	55
Mobile Unit...	—	—	—	1	1	—	—	1	1	—	—	1	1
Newtongrange	4	26	67	97		4	15	50	69	3	12	39	54
Penicuik—													
Bellman's Rd.	4	14	94	112		—	5	37	42	—	3	22	25
Eastfield	...	8	36	84	128	1	17	40	58	—	8	19	27
Pinkie	...	5	58	82	145	1	37	64	102	1	26	37	64
Polbeth	...	31	40	60	131	8	33	51	92	8	33	46	87
Rosewell	...	—	9	10	19	—	4	7	11	—	2	7	9
Wallyford	...	42	69	51	162	9	29	30	68	7	27	27	61
West Calder...	1	24	15	40		1	13	12	26	1	12	11	24
Whitecraig	...	8	7	18	33	2	2	11	15	1	1	6	8
Woodburn	...	1	2	5	8	—	—	4	4	—	—	2	2
Various day Schools	—	7	11	18		—	7	11	18	—	7	11	18
Total	...	316	1057	1558	2931	79	514	967	1560	63	418	718	1199

EYES

Pre-School Children referred for Visual Defect

			Referred	Examined 1st Exam	Re-exam	Of those Glasses Pre- scribed	Examined Not Pre- scribed	Referred to Orthoptic clinic
Bonnyrigg ... ..	...	...	31	21	10	3	28	12
Currie ... ..	...	...	18	14	4	7	11	7
Dalkeith ... ..	...	...	57	39	18	9	48	22
East Calder ... ..	...	...	—	—	—	—	—	—
Edinburgh ... ..	...	...	—	—	—	—	—	—
Loanhead ... ..	...	...	11	8	3	1	10	5
Musselburgh ... ..	...	...	13	9	4	4	9	7
Newtongrange ... ..	...	...	16	10	6	3	13	8
Penicuik ... ..	...	...	15	14	1	1	14	10
West Calder ... ..	...	...	12	7	5	—	12	4
Total ...	...	...	173	122	51	28	145	75

Ear, Nose and Throat.—No children treated under Local Health Authority Schemes.

Speech Defect.—Owing to a shortage of Speech Therapists, no pre-school children were referred by Health Visitors for examination by Medical Officers and referral to Speech Therapist.

Ultra-violet Light Treatment.—Three children were treated under Local Health Authority Schemes.

Orthopaedic.—During the year 186 pre-school children (91 new cases, 95 old cases) were seen by the Orthopaedic Surgeon and of these 4 were admitted to Princess Margaret Rose Hospital during the year. At the end of the year 267 pre-school children (91 new cases, 176 old cases) were on the Orthopaedic Register.

NURSERIES AND HOMES

Day Nurseries

Provided by Local Health Authority.

Olivebank Nursery, Market Street, Musselburgh

				Babies	Tweenies	Toddlers
Places provided ... ..	...	...	...	8	16	36
Places taken up at 31/12/67 ... ..	...	...	...	6	8	29
Average number of daily attendances ... ..	...	...	...	8	11	30
Waiting list at 31/12/67 ... ..	...	...	...	—	—	—

This is an approved Training School. All the staff are X-rayed annually.

There are no other Nurseries in the County.

Nurseries and Child Minders Regulation Act, 1948

Premises :

Registered at 31st December, 1966 ... ..	...	...	...	5
Applications granted during 1967 ... ..	...	...	...	12
Registration terminated during 1967 ... ..	...	...	...	4
Registered at 31st December, 1967 ... ..	...	...	...	14
Registration pending ... ..	...	...	...	1
Number of places approved ... ..	...	...	...	367

Persons :

Registered at 31st December, 1966	6
Applications granted during, 1967	4
Registration terminated during, 1967	4
Registered at 31st December, 1967	6
Registration pending	1
Number of places approved	62

Mother and Baby Homes

(a) Maintained by voluntary Bodies—

Dr Barnardo's Home, Ravelrig, Balerno

This caters for children under the age of 5 years and has accommodation for 32 children all told.

(b) Maintained by Local Authority—None.

Residential Nurseries and Children's Homes

(a) Maintained by Voluntary Bodies—

Red House Home for Boys, Musselburgh

The Home accommodates 20 boys between the ages of 5 and 15 years who are orphans or whose parents are unable to support them, or whose surroundings are very undesirable. Most of the boys remain in the Home for several years.

Nazareth House, Lasswade

This is a Roman Catholic Home for orphans and children from broken homes. It has accommodation for 12 girls and 17 boys under 5 years of age and 24 girls and 53 boys between 5 and 12 years of age.

(b) Provided by Local Authority Children's Committee :

Children's Homes—Midfield House, Lasswade, Tenterfield House, Haddington, Currie, and Penicuik.

Maintained by the Local Authority under the auspices of the Midlothian, East Lothian and Peebles Children's Committee for both short and long stay cases.

Children in above Homes at 30/11/66	77
Admitted during 1967	72
Died during 1967	—
Discharged during 1967	59
Remaining in Homes at 30/11/67	90

Family Homes—Currie, Penicuik, Tranent (2) and Gorebridge

Children in Homes at 30/11/66	31
Admitted during 1967	4
Died during 1967	—
Discharged during 1967	10
Remaining in Homes at 30/11/67	25

Hostel—Gorebridge

In Hostel at 30/11/66	3
Admitted during 1967	6
Died during 1967	—
Discharged during 1967	4
Remaining in Home at 30/11/67	5

Children Act, 1948

Children on Child Life Protection Register at 30/11/67	...	9
Children from Midlothian boarded-out in Midlothian	...	83
" " " boarded-out in other areas	...	74
" " " in Joint Children's Committee Homes		106
" " " in Registered Voluntary Homes	...	94
Children from other areas boarded-out in Midlothian	...	256

Adoption Act, 1958

Number of adoptions arranged by Local Authority						
(a) Direct placing	...	...	...	...	...	5
(b) <i>Curator ad Litem</i>	...	...	...	...	...	64

Number of children supervised under Part IV following notices						
under (a) Secs. 37 (1) (a) and 38	...	...	...	...	...	27
(b) Secs. 37 (1) (b) and 38	...	...	...	...	...	14

Children coming into care 1/12/66 to 30/11/67 :

Under 2 years	2-4 years	5-15 years	Over 15 years	Total
44	65	111	5	225

HEALTH VISITING

Domiciliary Visitation :

	Cases	Visits
1. Expectant Mothers	217	270
2. Children Born in 1967	2,726	15,436
3. Children Born in 1966	2,692	12,108
4. Children Born in 1962-65	7,378	17,725
5. School children	1,169	1,996
6. Persons aged 65 years and over	1,817	3,514
7. Mental Health—care and after care	59	164
8. Other hospital after care	42	99
9. Tuberculosis households	312	671
10. Other infectious diseases	7	16
11. Problem Families	222	1,246
12. Other	198	271
13. Persons visited above at request of G.P. or hospital	—	27
14. Waste Visits	—	7,036

ATTENDANCES AT CLINICS, ETC.

Local Health Authority Clinics :

	Sessions
1. Ante-natal	—
2. Post-natal	—
3. Ante-natal and Post-natal combined	69
4. Child Welfare	1,757
5. Toddlers	401
6. Immunisation, etc.	59
7. Mothercraft and relaxation combined	200
8. Health Education	10
9. Deafness in young children, etc.	134
	<hr/> 2,630 <hr/>

Hospital Units :

1. Maternity	...	...	...	...	...	...	...	—
2. Paediatric	...	...	...	...	...	...	...	2
3. Geriatric	...	...	...	...	...	...	...	1
4. Mental Health	...	...	...	...	...	...	...	2
5. Other	...	...	...	...	...	...	...	2
								<hr/> 7 <hr/>

School Health :

1. Minor Ailment	...	...	...	...	...	...	...	119
2. Cleanliness	...	...	...	...	...	...	...	380
3. Minor Ailment/Cleanliness	...	...	...	...	...	...	...	469
4. Eye Clinics	...	...	...	...	...	...	...	97
5. Medical Inspections	...	...	...	...	...	...	...	536
6. Health Education	...	...	...	...	...	...	...	172
7. Vision Testing	...	...	...	...	...	...	...	85
8. Tuberculosis—Skin Testing and B.C.G. vaccination	...	...	...	...	...	...	...	77
9. Other	...	...	...	...	...	...	...	46
								<hr/> 1,981 <hr/>

Other Services :

1. Staff Meetings	...	...	...	...	...	...	...	331
2. Visitors	...	...	...	...	...	...	...	144
3. Refresher Courses	...	...	...	...	...	...	...	51
4. Clerical	...	...	...	...	...	...	...	555
5. Other	...	...	...	...	...	...	...	382
								<hr/> 1,463 <hr/>

HEALTH EDUCATION

Throughout the year every opportunity was taken of educating the public in "Healthy Living". Talks, often with films, were given as shown in the following table :

Subject	School Children				Preformed Groups				Totals	
	Primary Talks	Primary Attdg.	Secondary Talks	Secondary Attdg.	Youth Talks	Youth Attdg.	Adult Talks	Adult Attdg.	Talks	Attdg.
Accident Prevention	26	1648	6	41	—	—	1	13	33	1702
Alcohol, Drug Addiction and Smoking	8	190	2	47	—	—	—	—	10	237
Child Development	—	—	36	63	—	—	—	—	36	63
Dental Health	5	497	—	—	—	—	1	30	6	527
Family Planning	—	—	1	7	—	—	—	—	1	7
Feminine Hygiene	27	227	38	1264	—	—	1	20	66	1511
First Aid and Home Nursing	—	—	—	—	31	27	27	83	58	110
General Hygiene	50	3446	10	65	—	—	—	—	60	3511
Geriatrics	—	—	—	—	—	—	8	15	8	15
Health Services	—	—	—	—	—	—	47	842	47	842
Mothercraft	—	—	131	343	—	—	172	192	303	535
Parent Craft	—	—	4	20	—	—	—	—	4	20
Personal Relations	—	—	1	17	—	—	—	—	1	17
Others	—	—	2	106	1	19	49	429	52	554
Total	116	6008	231	1973	32	46	306	1624	685	9651

In many cases talks covering one subject are given in series to small groups, c.g., Mothercraft. The total number of talks given are detailed but to avoid a misleading inflation of pupils and others attending these talks, only the actual numbers spoken to are given under each subject and not the total pupil etc. attendances.

In accordance with our general principle, of course, chief reliance was placed on the individual talks to parents and children at school medical and dental inspections and maternity and child welfare clinic sessions, and during home visitation.

STAFF COURSES

With the rapid advances in medicine and the continual changes in legislation with regard to Health Services and Welfare it is very difficult for members of staff to keep up to date. Regular staff meetings are held and these meetings certainly help, but, in addition every opportunity should be taken to send members of staff on organised courses, and the undernoted table shows how many members of the staff attended such courses during the year.

Courses Attended :

By Medical Officers	By Dental Officers	By Nursing Staff	By Other Staff
14	4	16	9

VACCINATION AND IMMUNISATION

Smallpox Vaccination

				Under 5 years	5 to 14 years	Over 14 years
Number vaccinated during 1967—						
Successful ...	...	...	...	1775	70	—
No reaction	...	...	...	95	6	—
Not examined	...	...	...	34	1	—
Total ...				1904	77	—

Number re-vaccinated during 1967—						
Successful ...	...	...	...	36	33	320
No reaction	...	...	...	4	—	25
Not examined	...	...	...	2	3	49
Total ...				42	36	394

					1 to 4 yrs.	5 to 15 yrs.
Percentage vaccinated of those resident in County at						
end of 1967	...	...	...	...	70	82
1206 records (760 Primary and 446 re-vaccinations) were returned by General Practitioners.						

Diphtheria, Whooping Cough and Tetanus Immunisation

	Under 5 years	5 to 15 years	Over 15 years
Number immunised during 1967	2267	110	—
Number given maintenance injection during 1967 ...	2645	1619	—
Number of confirmed cases of Diphtheria in 1967 ...	—	—	—
Number of deaths from Diphtheria in 1967	—	—	—

6 mths. to 4 yrs. 5 to 15 yrs.

Percentages immunised against diphtheria of those resident in the County at end of 1967 88 93

2069 records (921 Primary, 1148 Maintenance injections) were returned by General Practitioners.

Poliomyelitis Vaccination

The number of persons vaccinated during 1967 was as follows :

	Primary Vaccinations	Maintenance doses
Born in years 1943–1967	2,245	2,230
Born in years 1933 to 1942	50	10
Others	20	9

Total vaccinated in 1967 2,315 2,249

Total vaccinated from 1956 to 1966 66,443 73 073

Total vaccinated to date 68,758 75,322

6 months
to 4 yrs.

5 to 15 yrs.

Percentage immunised against Poliomyelitis of those resident in County at end of 1967 85 93

1264 records (868 Primary and 396 Maintenance doses) were returned by General Practitioners.

Tuberculin Testing and B.C.G. Vaccination

As in previous years, as soon as the Environmental Report was completed for each new case of tuberculosis, all adult home contacts were given appointments for chest X-ray examination, and all contacts under the age of 5 years or in attendance at school were skin tested—positive reactors being X-rayed and negative reactors being vaccinated with B.C.G.

DETAILS OF SKIN TESTING AND B.C.G. VACCINATION

A.—Contacts (Children and Young Persons)

Age	{		{		{		{		{		{		Totals by sex	Total
	Under 1		1 and under 5		5 and under 10		10 and under 15		15 and under 20					
Positive Skin Test	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Negative Skin Test	—	—	1	—	—	1	—	1	—	—	1	2	3	
Negative Reactors	2	3	44	45	16	23	7	3	1	2	70	76	146	
Negative Reactors and non-tested														
Received B.C.G.	7	6	43	44	14	23	6	3	1	2	71	78	149	
Positive Reactors— X-rayed	—	—	1	—	—	1	—	1	—	—	1	2	3	

The parents of 2 male and 1 female children refused B.C.G. vaccinations,
One male child was placed on the register as a confirmed case.

In addition to the above 115 primary school children were skin tested following on confirmation of a class teacher suffering from tuberculosis. All the children were found to be negative.

Following on skin testing of "leavers" (see below) all pupils who showed a grade 3 or 4 positive reaction were treated as "cases" and all contacts were followed up. 23 pupils were involved and 71 contacts were followed-up. The results were as follows :—

- 6 Pre School children Heaf tested and given B.C.G.
- 6 School children Heaf tested and given B.C.G.
- 59 Adults were asked to attend for X-ray.
- 43 Attended for X-ray. All satisfactory.
- 4 Refused to attend.
- 12 Were given appointment cards but did not attend.

B.—School Leavers

The parents of all children born in 1953 were asked to give their consent to skin test, with B.C.G. vaccination of negative reactors and X-ray of positive reactors. In 93·2 per cent. of cases, the parents gave complete consent.

The positive reactors and marked reactors from the previous year were X-rayed at special sessions at the schools by means of large films. No cases of respiratory tuberculosis were found.

No. Skin Tested			Refusals			Positive Reactors			X-rayed		
M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
821	817	1638	12	8	20	178	161	339	211	196	407

1294 children were given B.C.G. vaccination.

179 of the positive reactors had previously had B.C.G.

INFECTIOUS DISEASE

Tuberculosis

The trend of notification since pre-war years is shown in the following table :

	1935-39	1940-44	1945-49	1950-54	1955-59	1960-64	1965	1966	1967
	Av.	Av.	Av.	Av.	Av.	Av.			
Respiratory ...	52	65	107	143 (23)	78 (34)	40 (17)	30 (5)	35 (6)	36 (6)
Non-respiratory ...	50	57	41	28 (6)	19 (3)	13 (2)	16 (1)	11 (1)	7 (—)
Total ...	102	122	148	171 (29)	97 (37)	53 (19)	46 (6)	46 (7)	43 (6)

Figures in brackets are transfers in, previously included in the total figure.

One respiratory case was not confirmed.

Methods by which new respiratory cases were discovered

Symptom group examined	...	...	...	...	...	23
Contact group examined	...	...	...	...	...	10
Mass Radiography	...	...	...	...	...	2

Types of new Respiratory Cases found

	Total Cases	Sputum +ve	Early Acute	Chronic	Chronic with recent Spread	Contact of known Cases
Males ...	25	6	15	6	4	4
Females ...	10	1	7	1	2	3

Mass Radiography

Special sessions for school staffs were arranged this year. 801 teachers and 336 ancilliary staff were X-rayed and all results were satisfactory.

554 members of the County Council staff were X-rayed. All the results were satisfactory.

99 applicants for employment under the County Home Help Scheme were examined by Mass Radiography, by special arrangement. One case was referred to the Chest Physician for investigation but was unconfirmed.

Cases

The distribution of cases throughout the County is indicated in the following tables :

*Number of Persons Resident in the Area at 31st December, 1967
who were known to be suffering from Tuberculosis*

Age Distribution

		Age Group (years)	Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 and upwards	Total
RESPIRATORY												
Confirmed 1967 ...	M.	—	—	2	2	2	2	3	7	5	2	25
	F.	—	—	2	1	1	1	2	—	1	2	10
Total in Area (31/12/67) ...	M.	—	—	2	11	13	34	28	48	45	19	200
	F.	—	—	4	7	8	33	45	13	5	10	125
NON-RESPIRATORY												
Confirmed 1967 ...	M.	—	—	—	—	2	—	—	1	—	—	3
	F.	—	—	—	—	—	3	—	—	—	1	4
Total in Area (31/12/67) ...	M.	—	—	—	1	3	7	7	9	3	5	35
	F.	—	—	—	2	7	9	16	8	8	10	60

Area Distribution

AREA			Confirmed in 1967		Total known Cases in Area	
			Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
Landward	...	...	21	5	191	55
Bonnyrigg and Lasswade	...	...	2	1	15	5
Dalkeith	...	...	1	1	26	8
Loanhead	...	...	1	—	16	4
Musselburgh	...	...	10	—	63	18
Penicuik	...	...	—	—	14	5
			35	7	325	95

Number of Persons who died from Tuberculosis in the area during the year, with particulars as to period elapsing between Notification and Death, and between Discharge from an Institution and Death.

	Respiratory		Non-Respiratory	
	Males	Females	Males	Females
Number of persons who died from tuberculosis... ..	3	—	—	2
Of whom—				
Not notified or notified only at or after death	—	—	—	1
Notified less than 1 month before death ...	1	—	—	—
Notified from 1 to 3 months before death	—	—	—	—
„ „ 3 to 6 months before death	1	—	—	—
„ „ 6 to 12 months before death	—	—	—	—
„ „ 1 to 2 years before death ...	—	—	—	—
Notified over 2 years before death ...	1	—	—	1

Sanatoria

			In Sanatoria on 1st Jan. 1967		Admitted during 1967		Discharged or died during 1967		In Sanatoria on 31st Dec. 1967	
			R.	N.R.	R.	N.R.	R.	N.R.	R.	N.R.
<i>Bangour Hospital Group</i>										
Males	...	...	2	—	10	2	9	2	3	—
Females	...	...	1	—	4	2	5	2	—	—
Children	...	...	2	—	6	—	8	—	—	—
<i>East Fortune Hospital</i>										
Males	...	...	—	—	3	—	3	—	—	—
Females	...	...	—	—	2	—	1	—	1	—
Children	...	...	—	—	1	—	1	—	—	—
<i>Other Hospitals</i>										
Males	...	...	2	1	8	1	9	2	1	—
Females	...	...	1	1	2	2	3	3	—	—
Children	...	...	—	—	—	—	—	—	—	—
Total										
Males	...	...	4	1	21	3	21	4	4	—
Females	...	...	2	1	8	4	9	5	1	—
Children	...	...	2	—	7	—	9	—	—	—
			8	2	36	7	39	9	5	—

There was no waiting list at the end of the year.

Housing of Tuberculosis Cases

					Landward	Bonnyriggs and Lasswade	Dalkeith	Loanhead	Musselburgh	Penicuik	Total
					R. N.R.	R. N.R.	R. N.R.	R. N.R.	R. N.R.	R. N.R.	R. N.R.
Overcrowded at 31/12/66											
3-Apt. ...	...	...	...	...	4	—	1	—	—	—	9
4-Apt. ...	...	...	...	...	1	2	—	—	—	—	2
5-Apt. ...	...	...	...	...	14	—	—	—	—	—	14
Of these, willing to be rehoused											
3-Apt. ...	...	...	...	...	4	—	—	—	—	—	7
4-Apt. ...	...	...	...	...	1	2	—	—	—	—	2
5-Apt. ...	...	...	...	...	3	—	—	—	—	—	3
Rehoused during 1967 in											
3-Apt. ...	...	...	...	...	1	2	—	—	—	—	6
4-Apt. ...	...	...	...	...	—	1	—	—	—	—	1
5-Apt. ...	...	...	...	...	—	—	—	—	—	—	—
Overcrowded at 31/12/67											
3-Apt. ...	...	...	...	...	1	1	1	—	—	—	4
4-Apt. ...	...	...	...	...	2	—	—	—	—	—	3
5-Apt. ...	...	...	...	...	11	—	—	—	—	—	11
Of these, willing to be rehoused											
3-Apt. ...	...	...	...	...	1	1	—	—	—	—	2
4-Apt. ...	...	...	...	...	2	—	—	—	—	—	3
5-Apt. ...	...	...	...	...	2	—	—	—	—	—	2

FOOD POISONING

During the year there was a total of 7 confirmed cases of food poisoning and details are as follows :

Salmonella cubana	...	...	...	...	...	1 case
Salmonella enteritidis	...	...	...	...	...	1 case
Salmonella kinshasa	...	...	...	...	...	1 case
Salmonella paratyphi B	...	...	...	...	...	3 cases
Cl. Welchii	...	...	...	...	...	1 case

Venereal Disease

Patients attend for consultation and treatment at the Royal Infirmary, Edinburgh, where they may be admitted to special wards for in-treatment if necessary.

Examinations of specimens are carried out at the Infirmary Laboratory.

The number of cases treated during the year was as follows :

Syphilis—Acquired	...	...	6	Non-gonococcal urethritis	...	42
Congenital	...	...	—	Other venereal infections	...	164
Gonorrhoea	...	...	22	Non-venereal disease	...	44

The further following confirmed cases of other infectious diseases occurred during the year :

	Landward	Bonnyrigg and Lasswade	Dalkeith	Loanhead	Musselburgh	Penicuik	Total 1967	Not admitted to Hospital	Total 1966
Dysentery	100	—	—	—	8	7	115	111	54
Cerebrospinal Fever	—	—	—	—	—	—	—	—	1
Pneumonia, Acute Primary	—	—	—	—	2	—	2	2	4
Pneumonia not otherwise notifiable	—	—	—	—	—	—	—	—	7
Scarlet Fever	3	—	—	—	11	—	14	13	26
Whooping Cough	67	—	—	—	28	—	95	88	22
Food Poisoning	2	—	—	—	1	1	4	1	56
Para-typhoid B	—	—	—	3	—	—	3	—	—
Pneumonia, Acute Influenzal	—	—	—	—	—	—	—	—	4
	172	—	—	3	50	8	233	215	174

Bacteriological Services

The following statement gives details of the principal examinations carried out for the County Health Department and General Medical Practitioners by the Bacteriology Department, University of Edinburgh, during 1967. I am indebted to Dr Swain and Dr Wilson for the following report :

The number of examinations carried out in 1967 (12,932) was larger than in either of the past two years. This was not due to an increased submission of any particular type of specimen nor to any epidemics but to a general increase in most types of specimen except stools. This probably reflects the increased use of this laboratory following the extension by the Regional Hospital Board of the facilities for sending specimens by their van service.

Urine specimens contributed the largest element to the increase, rising from 1860 in 1966 to 2867. This is in line with modern medical practice.

The number of nose and throat swabs submitted (409) was nearly double that in 1966. The proportion yielding haemolytic streptococci remained at about one third and no diphtheria bacilli were found.

Faecal specimens were slightly fewer, but the most dramatic change was in the number yielding *Salmonellae*. In 1966, 109 isolations of *Salmonellae* were made, 92 of them being *S. typhimurium*. In 1967 only 8 isolations were made, none of them being *S. typhimurium*.

The story behind this, referred to in last year's Report, started with an outbreak of *S. typhimurium* infections in 1965. The epidemiological evidence suggested that the vehicle of infection was milk from a particular farm but the organism was not demonstrable in samples of milk or of dung from the cows there. In the following year (1966) a similar outbreak occurred, and the epidemiological evidence implicated the same farm again. This time, examination both of bulk milk and of milk samples from individual cows demonstrated the presence of *S. typhimurium* and it was of the same phage-type as had caused the outbreaks both in 1965 and 1966.

Following slaughter of the infected cows and other appropriate measures, no cases of infection due to this organism occurred in 1967. Successful clearing up of this source of infection was made possible by the active collaboration of Medical and Veterinary staff both in the field and in the laboratory, but scores of people would not have been ill and much time and work by many people could have been put to more productive use, if the sale of unpasteurised milk were prohibited.

This point is further demonstrated by the investigations carried out in July and August of 1967 in an endeavour to trace the source of infection in a case of brucellosis. The patient was known to drink raw milk from a local dairy farm, so individual milk samples from over 200 cows then in milk were examined by the Br. abortus Ring Test and further samples from all the cows giving positive or suspicious results were retested. The presence of the living organism could not however be demonstrated either by culture and by guinea pig inoculation in any of these animals but the possibility remains that an animal of that herd, now dry or sold, was in fact the source of the patient's infection.

Though the acquisition of tuberculosis by drinking raw milk is now unlikely, the sale of unpasteurised milk still exposes the consumer to unnecessary risk from other infections.

Number of specimens examined were as follows :

	Positive	Total
Swabs from ear, nose and throat examined for <i>C. diphtheriae</i> ...	—	233
Swabs from nose and throat examined for haemolytic streptococci, etc.	144	407
Swabs for Vincent's organisms	—	5
Staphylococci	—	9
Bordatella pertussis	—	1
Specimens examined for <i>Myco. tuberculosis</i> —		
By microscopical examination of the concentrated specimen—		
Sputa	—	27
Pus, pleural fluid, etc.	—	1
Other specimens (urine faeces, etc.)	—	5
By cultivation (all specimens)	—	25
By animal inoculation (urine)	—	8
Specimens for general bacteriological examination—		
Urines	—	2867
Sputa	—	157
Ear swabs	—	102
Pus	—	155
Vaginal and urethral swabs	—	132
Blood Cultures	—	28
Staphylococcal coagulase tests	110	161
Tests of antibiotic sensitivity	—	6989
Faeces examined for (a) organisms of the Salmonella and dysentery groups and other bowel pathogens	127	972
<i>Sh. sonnei</i>	115	
<i>S. paratyphi B</i>	5	
<i>Esch. coli</i>	4	
<i>S. Kinshasa</i>	1	
<i>S. enteritidis</i>	2	
(b) Helminths and protozoa	—	2

							Positive	Total
Specimens examined for other pathogens :								
Malarial parasites	...	...	...	...	...	...	—	3
Food, Milk and Water :								
Food examined for pathogens	...	...	...	...	...	...	—	4
Milk examined by Br. abortus Ring Test	...	...	...	...	...	...	4	235
by culture	...	...	...	...	...	...	—	11
by guinea pig inoculation	...	...	...	...	...	...	—	11
Serological Tests :								
Widal	...	...	...	...	...	...	—	25
Paul Bunnell	...	...	...	...	...	...	19	119
Agglutination for Leptospirosis	...	...	...	...	...	...	—	10
<i>L. icterohaemorrhagiae</i>	...	...	...	...	...	...	1	
<i>L. canicola</i>	...	...	...	...	...	...	1	
Other serotypes	...	...	...	...	...	...	8	
Syphilis Flocculation Reaction	...	...	...	...	...	...	1	115
Wassermann Reaction	...	...	...	...	...	...	—	33
Kahn Verification Test	...	...	...	...	...	...	—	33
Gonococcal Complement Fixation Test	...	...	...	...	...	...	1	23
Virology :								
Sera for antibodies	...	...	...	...	...	...	—	19
Smear for microscopy	...	...	...	...	...	...	—	1

HANDICAPPED PERSONS

Physical Defects—General Classification

The number of registered Handicapped Persons has increased over the last twelve months from 742 to 756 as at 31st December, 1967. They are shown below in the following categories :—

	Male		Female		Total	
	1966	1967	1966	1967	1966	1967
Amputations	10	8	2	3	12	11
Arthritis and Rheumatism	—	1	16	19	16	20
Congenital Malformations	5	6	6	8	11	14
Diseases*	11	7	9	7	20	14
Deaf and Dumb	18	22	21	23	39	45
Blind and Partially Sighted	135	134	162	153	297	287
Injuries	12	10	7	9	19	19
Organic Nervous Diseases	47	50	38	42	85	92
Other Mental and Nervous Diseases	114	113	116	127	230	240
Respiratory Tuberculosis	1	1	2	2	3	3
Non-Respiratory Tuberculosis	—	—	—	—	—	—
Other Diseases and Injuries	4	5	6	6	10	11
	357	357	385	399	742	756

* Genito-urinary : Heart and Circulation : Respiratory (except T.B.) : Skin.

Senior Training Centres for Adult Disabled

The two Training Centres for the Disabled have been in operation for almost twelve months thus giving us an opportunity to assess their value. For the first half of the year the Centres were controlled and maintained by our team of occupational therapists who laid the foundation for the Centres future. Reasonable activity was continued and the number of trainees attending the Centres increased. Unfortunately, no industrial work was secured for the Training Centres during this period so that the employment of those attending

the Centres was obviously in the nature of occupational therapy. In July, with Committee approval, two male Training Centre Supervisors were engaged, one with experience in similar workshops for the disabled and having a certificate from the Jordanhill College of Education, the other a former manager of an industrial concern. Although our occupational therapists no longer had control of these Centres they were encouraged to maintain contact with them so that staff co-operation would continue and experience would be shared for the total well-being of the disabled. Following the employment of Centre Supervisors and instructor staff the Training Centres gradually acquired industrial contracts and have slowly diminished the amount of craft work which was then their sole employment.

The Training Centres opened toward the latter end of January taking in those disabled persons who normally attended the County Council's four scattered classes for occupational therapy, which took place one afternoon per week. The original intake of trainees was 32 and this number has increased to a present total of 86 who attend the Centres, for the most part five days per week. Naturally the types of disability of our trainees cover a wide field, and include mental handicap and epilepsy, physical handicaps including chest and cardiac conditions, hemiplegia, disseminated sclerosis, head injury, etc. The reader may thus appreciate the difficulties experienced regarding training and employment.

Numerous exhibitions were held especially during the first half of the year in question so as to encourage the sale of our finished articles and to give publicity to the Training Centres activity. One such exhibition proved to be of tremendous value and interest to the public, especially as it was held to coincide with the National Disabled Persons Week, in the Clubhouse of the Dalkeith Old People's Welfare Committee. This show was particularly advantageous since it drew a large crowd of Club Members to its opening thus emphasising the benefit of Old People's Clubs participating in joint efforts and themselves receiving an introduction to the world of hobbies and craft activities. As part of our publicity campaign we arranged an exhibition of craft-work goods in our County Offices where a large number of orders were taken. A similar opportunity arose when we were invited to show our produce and discuss the Training Centres activity in one of the County's schools. Finally, we were able to stage a large exhibition of our work at the Annual Dalkeith Agricultural Show. We naturally took advantage of other types of advertising apart from articles in local and national newspapers. Numerous photographs of excellent quality were taken of our produce for display stands in the County's various Health Clinics and, all articles made by the Training Centres went out with a distinguishing stick-on label showing where the produce was manufactured.

Particular efforts were made, when time was available, for the trainees to be given instruction on laying tables, washing dishes, assisting in the training kitchen or in the outside gardens. From the kitchen training scheme we were able to build up a cake baking programme for internal consumption and sales outside the Centre.

The gardens were partly maintained by trainees under supervision, and subject to the pressure of work contracts, further training in these various spheres will be continued. During the period under review there was ample time for special training to be given in the practice and correct use of sewing machines, and various training programmes were started in order to give instruction in various probable industrial contracts, e.g., renovation of metal framed chairs and work in connection with the County Library. Some industrial work became available, but was unsuitable. However, one contract gained via the Linburn Workshops for the Blind gave an indication of the Centre's capability when the trainees sorted, counted and packaged 7000 plastic pegs for a time-table planning board produced by the Linburn Workshops. To complete the order the pegs were finally packed into boxes to complete a total kit. Nevertheless, to show the range of craft activity it is interesting to note that the Centres produced cot blankets, lampshades and lamp standards, stools, cushions, occasional tables, table mats, various embroidered objects like aprons, and a number of aids for the disabled. The total monies made during the first 6 months consisted of a surplus, after payment for materials of £180 19s. 6d.

The new Centre Supervisors began employment with this Authority during July in order to familiarise themselves with the Centres' layout, equipment and various administrative procedures, before the Centres re-opened on 31st July following their closure of one month when the trainees went on their summer holidays. In actual fact, they have now been guiding the Centres activity for 5 months. Therefore, in view of the circumstances, it is extremely pleasurable to report the splendid progress of these Training Centres under the day to day control of the Centre Supervisors. So good has been the effort made by the Centres that the entire Health and Welfare Committee visited in order to see this excellent work for themselves. Industrial contracts for work have now been gained and art/craft type articles are only being made when there is a lapse in industrial work, and even this has been re-designed so that the work, irrespective of its nature, is akin to normal factory output.

The first industrial work contracts gained for the Centres consisted of cutting, painting and assembly of plastic holly sprays etc., sorting and packing of plastic pegs for a time-table, the assembly and packaging of cartons, the assembly of plastic horses, cutting out plastic figure shapes, painting plastic cowboys and various other plastic models, making and assembling cardboard boxes of various sizes, cutting and shaping expanded polystyrene for packing purposes and preparation and assembly of factory stacking pallets. In addition to this type of industrial work the Training Centres have been able to supply notice boards, Meals on Wheels vehicle container retaining platforms, birthday, christening and Christmas cakes made and decorated in the Centres training kitchens, nylon pot scourers, mosaic inlaid articles such as occasional tables, cheese boards, tea-pot stands and sweet dishes, wash leathers, picture frames, greetings labels, children's desk and chair sets, educational aids for schools and aids for the disabled, bookcases and similar

joinery work, as well as doing repair work of various types such as re-seating metal stacking chairs etc. At the moment of writing the Training Centres are in a position to cater for almost any type of job, for instance we have recently negotiated and succeeded in obtaining an order for the production of four single divan beds and a large cupboard. The future is interesting in that we are negotiating for contracts for the assembly and packaging of radio spare parts, for the assembly of paper carrier bags, the assembly of cardboard boxes, the production and assembly of wooden boxes and advertising display stands. Undoubtedly, as industrial work increases so must our ability to wander into other production fields cease and such small items that have been mentioned will no longer be produced in the Centres. Obviously industrial work frequently means no costs for materials and therefore less administrative record keeping and stocktaking.

So successful have been the Training Centres that in the last five months the income, after payment for materials, reached a record level of £1078 18s. 10d. In view of the probable success of these Centres, the Health and Welfare Committee agreed that a small wage or weekly payment of 4s. per day be made to the trainees, starting on the 24th November with a retrospective payment to the 12th October. Monies so far paid out to trainees in the form of a weekly payment to 15th December, 1967 amounts to £149. Obviously the object of making a payment of some description to the trainees the moment industrial work was processed in the Training Centres was not only correct in the moral sense, but gave a firm psychological uplift to those handicapped persons who saw themselves as working in industry like normal people. We would like to think, although it will be difficult to prove, that we see a tremendous difference in the trainees since industrial work started and that their wellbeing has been enhanced tremendously under this new scheme of work. We believe that whilst there is tremendous value in occupational therapy type activity this is seen by many disabled persons as a pastime or playtime activity that does little for them other than to give an occupation. Men who do not know one end of a ruler from another, daily walk to work with a ruler sticking out of their overall pocket as they act the role of workmen. The beauty of the system is that because the ruler must be used on occasion in their work they therefore learn its function and understand how to use it. It is interesting to note that shortly after the Centres opened we noticed how very few persons washed their hands in the toilets. Today, the paper towel buckets are completely full since they wash their hands on every conceivable occasion.

The one day outing for our disabled persons including trainees and others took place on the 27th June when a coach trip to the Trossachs was arranged, stopping at Aberfoyle for lunch and at Callander for tea. We used two 46 seater buses rather than our own dual-purpose vehicles, and the handicapped were collected from their own homes by our vehicles and off loaded on to the two coaches at each Centre. Among the disabled on the trip were a dozen wheelchair cases whose wheelchairs were carried in the large boot recesses

at the back of the coaches. Each coach had members of staff and a British Red Cross Nurse who was available for any casualty. The weather on the day in question was exceptionally fine and no mishap whatsoever occurred. This annual outing is one which is looked forward to all year round by our trainees and others, and they talk about it for months afterwards sharing photographs, which were taken at that time, with one another. The second big event in the lives of our trainees was when a special outing was arranged on 4th December so that they could go shopping in Edinburgh. This was an exceptional outing, so far as they were concerned and two things took place which had never happened to them hitherto. For they were going shopping, whereas normally they could not do this and secondly they were spending money which they themselves had earned whilst working in the Training Centres. This outing allowed them to make purchases of gifts for their parents without the parents knowing, which is somewhat exceptional. The last, but very special treat for our trainees, was their own Christmas Party held in each Centre. We believe that each Centre has developed its own personality and group cohesion—social and work-wise, and should be encouraged except for joint work contracts and payment of wages from the combined income.

Occupational Therapy

This service continued its vital work, although we have now unfortunately lost the last of our Senior Occupational Therapists to other Local Authorities and hospitals, or to be married. Fortunately the service was partially maintained until approximately one month ago, and the types of condition and number of patients are as follows :—

Mentally Retarded	...	...	5	Mentally Ill	...	...	9
Heart	...	...	12	Hemiplegia	...	...	19
Head	...	...	3	Cerebral Tumour	...	...	1
Arterio	...	...	2	Amputee	...	...	7
Traumatic Injuries	...	...	2	Disseminated Sclerosis	...	...	8
Muscular	...	...	1	Parkinson's Disease	...	...	2
Polyneuritis	...	...	1	Ankylosis Spondylitis	...	...	2
Osteo	...	...	17	Geriatric	...	...	3

We were exceptionally pleased to be able to assist in the setting up of the first Disabled Persons' Club in the County under the auspices of the Phoenix Fellowship (Newtongrange) Youth Club for the Disabled, which holds its Club Night once a week in Newtongrange. Plans are under consideration for a further Club of this kind to cater for Disabled Persons in another part of the Authority's area. Consideration has also been given to the possibility of beginning Social Clubs in our Training Centres for the Disabled.

Occupational Therapy in our four Eventide Homes continued to

receive the attention of one of our Senior Occupational Therapists, and this work is indicated below :—

						Sessions per week	Average Attendances
Limefield House	...	...	...	...	...	1	14
Newtonloan Lodge	...	...	...	...	...	1	11
Wedderburn House	...	...	...	...	...	2	27
Westfield Park Home	...	...	...	...	...	2	26
						<hr/> 6	<hr/> 78
						<hr/>	<hr/>

The number of elderly people resident in our Eventide Homes who attend these Occupational Therapy Classes increases and decreases according to mood and the natural fluctuation between entry and discharge. Nevertheless, we encourage those elderly persons who are capable to visit the Occupational Therapist's Class when this is in session in order to give a hobby or occupation of interest. When considering the needs of the younger residents in our Homes, some thought is in our minds to encourage them to attend our Training Centres for the Disabled when these are fully staffed in order to find new outlets for energy and to give a greater interest in life than is at present available.

PHYSIOTHERAPY

Staffing presented no problems during 1967, full strength being maintained throughout the year. All the Physiotherapy Services were maintained with an increase in demand for domiciliary visits particularly. Unfortunately this is still limited in the main to recent stroke and fracture cases although a few respiratory cases where only short-term therapy is required have been seen, and this does not meet the demand for physiotherapy for the many other conditions which are referred. Cases are referred by family doctors, but also on discharge from hospital where consultants wish treatment continued at home.

By the end of the year 53 new cases had been referred and 11 patients referred in 1966 were still on treatment.

A total of 1254 home visits were made to treat these patients ; some required treatment over a fairly lengthy period of time ; in others the Area Physiotherapist provided a walking aid for Handi-capped Persons on request from general practitioner and followed up until patient was confident in its use.

Rosslynlee Hospital requested provision of Physiotherapy for some of their fracture cases and this also was provided with limitations on the numbers referred.

Selected cases of younger handicapped persons attend swimming sessions at Dalkeith on two evenings each week. Further extension of this service to other areas with pools has not been possible.

Physiotherapy Sessions at the various Part III Homes were maintained.

		Attendances				Type of Treatment		
		Male		Female				
		Repeat	New Cases	Repeat	New Cases	Heat	Exercises	Other
Limefield House	...	131	2	10	1	134	143	—
Wedderburn—								
Aged and Infirm	...	68	3	170	9	246	252	241
Chronic Sick	...	67	1	14	1	16	87	14
Newtonloan Lodge	...	150	2	261	2	341	435	392
Westfield Park—								
Aged and Infirm	...	59	3	79	4	64	149	133
Chronic Sick	...	29	2	79	2	35	112	106
Totals	...	504	13	613	19	836	1178	886

Aids to the Disabled

Various items of equipment and sick room aids have been issued to the disabled and elderly and works of adaptation carried out as shown hereunder :—

Bedding, etc., supplied—

Mattresses	...	...	...	...	...	11
Pillows	...	...	...	...	...	1
Fracture Boards (sets)	...	...	...	...	...	2
Hospital-type beds	...	...	...	...	...	11
Folding Iron bed	...	...	...	...	...	1

Invalid Chairs, Commodes, etc., supplied—

Invalid Chairs	...	...	...	...	...	31
Commodes	...	...	...	...	...	76
Polly Perches	...	...	...	...	...	8
Spinal Carriages	...	...	...	...	...	1

Works of Adaptation—

					Cost			Awaiting Provision
					£	s.	d.	
Ramps	...	...	...	8	120	10	0	—
Handrails—outside	...	...	...	20	130	1	8	—
Handrails—inside	...	...	...	23	123	6	6	—
Alterations to doorways	...	...	...	2	55	0	0	—
Alterations to pathways	...	...	...	7	78	0	0	—
Alterations to driveways	...	...	...	1	13	0	0	—
Lowering of bath	...	...	...	1	22	5	4	—
					£542	3	6	

Aids—

Bath Mats	...	...	...	...	...	3
Bath Safety Rails	...	...	...	...	...	5
Raised Toilet Seats	...	...	...	...	...	2
Walking Aids	...	...	...	...	...	9

Blind Persons

The work of caring for our Blind Persons is carried out by our Agents the Edinburgh and South East Scotland Society for the Welfare and Teaching of the Blind.

A number of specially trained Home Teachers are employed by the Society in order to care for the newly registered blind, and to give

aid to its members as necessary. The Society has the task of giving help and training to persons in need, and to offer employment in sheltered or open industry as necessary. The Home Teacher can supply special appliances and encourages occupational craft activity in the various centres run by the Society, and in the homes of the blind where this is required. In addition, the home teacher will encourage the teaching and understanding of Braille and Moon-type reading for those who would benefit. Various coach outings are arranged and the annual Christmas Party is attended by everyone who can manage to get along to it.

During the year 27 persons were examined with a view to registration ; 6 were found to be " Not Blind ", 8 " Partially Sighted " and 13 were registered " Blind ".

One of the registered persons was a man who is resident in Musselburgh and was anxious to continue in employment. He went to the rehabilitation centre at Alwyn House where he undertook a 12 weeks course, after which the Blind Persons' Resettlement Officer of the Ministry of Labour was successful in finding a job for him with a photographic processing firm.

The teachers have continued their work of helping and advising the newly registered blind in means of overcoming their handicap. This is a continuing process and even those on the register for some time still require assistance and advice as to the suitable parties which could help them in whatever their interests might be.

1171 visits were paid by the teachers for this purpose and there were, in addition, 213 visits where teaching of braille and handicrafts were undertaken. At the handicraft class at Dalkeith there were 178 attendances. Those attending the class at Dalkeith paid two visits to the class at Bathgate, one for a Burns Supper and the other a Hallowe'en Party. Some of the blind people in Midlothian took part in one of the outings which went to Kinghorn and St Andrews (2 outings).

The Annual Christmas Party in Dalkeith was as popular as it has been in the past.

A number of the blind people make use of our library books embossed in either braille or moon type and there are 39 talking book machines in use in Midlothian.

Blind Persons

Age Group		0-1	2-4	5-15	16-29	30-39	40-49	50-69	70+	Total
Registered in 1967	M	—	—	—	—	—	—	1	5	6
	F	—	—	—	—	—	2	—	5	7
Total on Register at 31/12/67	M	—	1	4	5	8	21	42	39	120
	F	—	—	2	5	2	7	37	79	132

Three mental normal boys and two mentally normal girls under 16 years were in attendance at the School of the Blind Institution ; one boy attends Murrayfield Day Centre because of additional handicap and one boy and one girl also with additional handicaps were not attending school.

Employed

						Male	Female
In workshops for Blind	...	...	...	...	...	38	4
As approved home workers	...	...	...	...	...	—	—
Others (excluding those at school)		...	...	...	...	11	2
				Totals	...	49	6
						==	==

Unemployed

	Trained		Not Trained but Trainable		Not available for employment		Not capable of work		Totals	
	M	F	M	F	M	F	M	F	M	F
For sheltered employment...	—	—	2	—						
For open employment ...	—	—	—	—						
For profession or university	—	—	—	—						
Total ...	—	—	2	—	61	121	2	2	65	123

There are also 35 partially sighted persons (14 males and 21 females) registered in the County.

Deaf and Dumb Persons

The well-being of the Deaf and Dumb is carried out by our Agents The Edinburgh Deaf and Dumb Benevolent Society who are experts in this field of social work.

The Society carries out regular visitation to the homes of the Deaf and Dumb, especially bearing in mind the needs of the elderly. Assistance is, of course, given with the numerous problems that can occur in the daily lives of deaf people. For instance, a severely deafened person was unable to determine whether or not anyone called at her front door and after suitable arrangements had been made, her front door-bell was in fact wired to her table-lamp, thus giving her ample warning as the light flashed on and off. On numerous occasions the police have been assisted, and employers frequently call upon the Society to assist them when dealing with the younger deaf person who may or may not appreciate concise instructions related to his work. Naturally co-operation is given to general practitioners and hospital authorities who find the Society of tremendous value to them when it is necessary to give details to a totally deaf person regarding treatment etc.

Spiritual Welfare is an essential part of the Society's function and Morning and Evening Services are conducted every Sunday in the Institute's Headquarters at Albany Street, and Monthly Devotional Meetings are arranged when visits are made to places of religious interest.

Recreational activities are not forgotten, and many organised games are soon under way in the swimming pool, which is hired once a week, and the young and the elderly are encouraged to attend.

In the gymnasium there is basket-ball and other such-like games for all to enjoy, and the elderly generation are encouraged to join the bowling team. Within the premises at Albany Street one can find members playing billiards, snooker, darts, table tennis, draughts, whist, chess and dominoes etc. These games are further enhanced by the National Organisation and Competitions which are held between the various Deaf Centres in Scotland. A recently fitted dark room is available for those who are interested in Photography and an enthusiastic Drama Group takes part in competitions with considerable success. In addition to the foregoing, visits are paid to places of interest such as the General Post Office, the Royal Observatory and local Printing Works etc.

Summer outings are arranged, and during the Christmas Season every elderly person receives a parcel and postal order to the value of 20 shillings.

The Society goes out of its way to ensure full employment for its members, and we are pleased to say that at the present time all those known to us are, in fact, employed.

The Society's Eventide Home "Castle View", Edinburgh has recently been completely overhauled and the residents are more than happy with their brightened surroundings.

Age Group

Positions as at 31/12/67

				0-4	5-15	16-29	30-39	40-49	50-69	70+	Total
Employed	...	...	M	—	—	6	2	2	6	1	17
			F	—	—	4	3	3	2	1	13
Unemployed or not available			M	—	—	—	—	—	2	3	5
			F	—	—	1	—	2	6	1	10
Degree of Deafness	Total	...	M	—	—	1	—	1	7	3	12
			F	—	—	3	2	1	6	1	13
	Severe	...	M	—	—	5	2	1	—	1	9
			F	—	—	2	1	4	2	1	10
	Moderate	...	M	—	—	—	—	—	1	—	1
			F	—	—	—	—	—	—	—	—

Epileptics and Spastics

Reliable information in regard to the number of adults suffering from epilepsy is not available, but at the present moment there are 92 known cases among children, young persons, and adults under guardianship or informal supervision under the Mental Health Act. The majority of these cases are of a mild degree, and the children in question are under treatment by their family doctors and in regular attendance at school. Children of normal intelligence who suffer from a degree of epilepsy which precludes their attendance at the ordinary school may be admitted to the Colony for Epileptics, Bridge of Weir. There are no special facilities available in this area for epileptics under the Local Health Services.

As with epilepsy, no reliable figures are available in regard to the number of adults suffering from Cerebral Palsy. There are at present 67 reported cases among children and adults. The majority of these cases have been specially "screened" at Westerlea or Rhuemore

while the others are either under supervision at hospitals' paediatric departments, or in the case of the majority of the mild defects, are under the supervision of the Orthopaedic Consultant to the schools orthopaedic scheme. In the case of school children, educational provision is as follows :

					Epileptics	Spastics
Westerlea School for Spastics	...	...	...	...	—	6
Colthurst House, Cheshire	...	...	...	...	1	—
The Colony, Bridge of Weir	...	...	...	...	2	—
*Ordinary Schools	...	...	...	...	46	18
†Special Schools for Educationally Subnormal Pupils	...	...	...	...	6	2
Occupational Centres	...	...	...	...	—	3
Broomhayes, Devon	...	...	...	...	—	1
West Park School, Edinburgh	...	...	...	...	1	—
					56	30

* One child suffers from both conditions
 † One child suffers from both conditions

In addition the visiting Physiotherapist, the Occupational Therapist and Speech Therapist from Rhumore visit the homes of certain of these children regularly.

Close co-operation with General Practitioners is maintained.
 At the end of the year, the numbers attending Murrayfield Day Centre, which is run by the Scottish Council for the Care of Spastics is used by the local authority who pay 2 gns. per day per child, were as follows :

- 6 children attend 5 days per week
- 1 child attends 4 days per week
- 5 children attend 3 days per week
- 2 children attend 2 days per week
- 1 child is on the waiting list.

There is one young adult who attends for half day per week but no charge is made.

MENTAL HEALTH

The Mental Health Officer and Social Workers have continued to visit Rosslynlee and Bangour Village Hospitals. The number of referrals remains small at 43.

Rosslynlee Hospital continues to hold Out Patient Clinics at Woodburn and Pinkie where 102 new cases were seen during the year. A number of Midlothian cases are also seen as out-patients at Sighthill Health Centre where Bangour Village Hospital holds out-patient clinics.

The elderly both in the community and in local authority residential care are continuing to present problems. There has been some speeding up in the transfer of suitable cases from mental hospital to Part III and vice versa but there are a number of cases in the community who cause trouble and alarm to relatives and neighbours for a considerable time before they can be admitted to Residential care.

MENTALLY HANDICAPPED

Cases under Guardianship

There has been a gradual reduction of cases under official guardianship due mainly to deaths and reversions to informal supervision. No new cases were put under formal guardianship during the year.

Informal Supervision

School leavers are screened and where necessary placed on informal supervision which is carried out mainly by Medical Officers, Social Workers and the Mental Health Officer. It is hoped to keep this positive supervision, in that cases which settle satisfactorily in the community can be discharged whilst those with problems may require permanent supervision.

Three quarters of the trainees at the Senior Training Centres are mentally handicapped, many have shown skills that were previously unknown and all have become more independent as a result of their attendance.

Children reported under Section 65 of the Education Act

The Esk Valley Voluntary Association for Mental Health opened an additional day centre at Penicuik towards the end of the year. This is open one afternoon a week and two children are attending. The day centre at Woodburn is now well established with 10 children attending regularly.

The scope of these centres is still limited by transport difficulties.

All Grade Sunday School

The Sunday School continues to cater for the mentally handicapped on a voluntary basis.

Numerous functions and holidays were held at "Shangri la" during the Summer. The Winter sessions for mentally handicapped at Bonnyrigg were gradually run down when the handicapped were absorbed into the Senior Training Centre at Whitehill.

MENTALLY HANDICAPPED

<i>Adults</i>	Male	Female
Under official Guardianship in Midlothian (of whom 6 males and 3 females are on the waiting list for admission to hospital)	14	21
Under official Guardianship in other areas— Fife	—	1
Under official Guardianship from another authority— medical supervision carried out by Medical Officer from Midlothian— East Lothian	—	1
Under informal supervision (of whom 6 males and 2 females are on the waiting list for admission to hospital)	76	67

<i>Children</i>					Male	Female
Aged 1-5 years	...	...	...	...	12	13
(of whom 2 girls are on the waiting list for admission to Hospital)						
Aged 5-16 years at home	...	...	...	...	6	6
(of whom 2 boys and 2 girls are on the waiting list for admission to Hospital)						
Aged 5-16 years in attendance at Education Committee Occupational Centre	...	...	...	...	24	24
(of whom 1 boy is on the waiting list for admission to Hospital)						
Aged 5-16 years in attendance at Special Schools or Special Classes	...	...	...	...	82	52
(of whom 2 boys and 1 girl are on the waiting list for admission to Hospital)						
Aged 5-16 years in attendance at Special Schools or Special Classes outwith Midlothian :						
Galashiels Special Class	...	...	...	...	1	—
Colthurst House, Cheshire	...	...	...	...	1	—
West Park School, Edinburgh	...	...	...	...	—	1
Murrayfield Day Centre, Edinburgh	...	...	...	...	7	4
(of whom 2 boys and 1 girl are on the waiting list for admission to Hospital)						
Aged 5-16 years at ordinary schools, I.Q. 70 or under in adjustment classes, etc., and in some cases on waiting list for transfer to Special Schools or classes	...	...	...	...	16	8

In Hospital

					1-5		5-16		Over 16		Totals	
					M	F	M	F	M	F	M	F
Bangour	...	...	...	...	Not obtainable							
Carstairs	...	...	...	...	—	—	—	—	3	—	3	—
Dykebar	...	...	...	...	—	—	—	—	—	1	—	1
East Fortune	...	...	...	...	2	1	3	1	—	—	5	2
Gogarburn	...	...	...	...	1	—	10	1	38	33	49	34
Larbert	...	...	...	...	—	—	—	1	4	7	4	8
St Aidans	...	...	...	...	—	—	—	—	—	1	—	1
St Joseph's	...	...	...	...	—	—	5	2	1	—	6	2
St Mary's	...	...	...	...	—	—	—	—	—	6	—	6
Strathmore	...	...	...	...	—	—	2	1	4	2	6	3
					3	1	20	6	50	50	73	57

Waiting List for Admission to Hospital

Age	Male	Female
1-5 years	1	2
5-16 years	6	5
Over 16 years	11	5
	18	12

Admissions during the Year

During the year 2 cases were admitted to hospital as long-term patients. Arrangements were made for short-stay admission of 7 patients (3 to Gogarburn and 4 to Willowbrae House, Edinburgh) to allow the parents the opportunity of having a rest from the strain of daily care.

Home Visits

	No. of cases	Medical Officers	Health Visitors	P.S.W.	Mental Health Officers	*Others	Voluntary Organisations
Under guardianship ...	35	85	28	—	14	70	—
Under informal supervision	143	207	51	—	250	—	—

*Local Government Officers who are part-time Mental Health Officers

Mentally Ill

	No. of premises	No. of sessions	Total attendances		First attendances	
			M	F	M	F
Clinics staffed by hospital staff in Local Authority premises	2	104	416	1005	40	62

Rosslynlee Hospital

		Males	Females
No. in hospital at 31/12/66	...	102	124
Admitted during 1967	...	90	116
Discharged during 1967	...	87	110
Died during 1967	...	14	12
Remaining at 31/12/67	...	91	118

35 cases were given care and after-care service

No information is obtainable from Bangour Hospital.

Total cases—mentally ill and mentally handicapped—referred to mental health officer from all sources during the year were as follows :—

Carried forward ...	1	Children's Department...	2
Rosslynlee ...	4	Self referred ...	2
Bangour Village Hospital ...	—	Scottish Home & Health Dept.	—
Other Hospitals ...	4	All Others ...	1
General Practitioners ...	4		

Home Visits

	No. of cases	Medical Officers	Health Visitors	P.S.W.	Mental Health Officers	Others
Under guardianship ...	—	—	—	—	—	—
Under informal supervision ...	8	2	83	—	70	—

Social Work

Miss Gilroy reports :—

During 1967 the Social Workers have been trying to extend and improve liaison with all other workers in the community and have also attempted some division of their own work. Miss Gilroy now covers the East side of the County and Miss Wedderburn the West.

When Mr Wallace, the Mental Health Officer left in September to attend Moray House for 1 year, another Social Worker, Miss Standing was appointed in October. She is working with Miss Gilroy on the East side of the County and is also undertaking visiting of mental defectives. The three Social Workers will undertake Mr Wallace's work, as far as possible, until his return.

Two hundred and thirty-four cases have been referred from the following sources :—

Family Doctors	...	...	...	...	...	19
Hospitals	...	...	...	...	...	39
Nursing Staff	...	...	...	...	...	60
Medical Officers	...	...	...	...	...	40
Other Social Workers	...	...	...	...	...	22
All others, including self-referral	...	...	...	...	...	54
						<hr/> 234 <hr/>

Many of the referrals were clients who needed support with long-term disabilities ; there were those with marital or family problems ; financial difficulties were another major group—it may be of interest to note that during the year Social Workers applied to many Charitable Funds on behalf of their clients and raised the sum of £619 16s. 0d.

1225 home visits were paid. Other activities included office interviews, visits to hospitals, clinics and Family Doctors. An attempt is being made to meet at least some of the Health Visitors regularly. The Social Workers would like more contact with Family Doctors—so far it has been difficult to arrange this, but it would seem that until both know each other better, referrals from this source are not likely to improve.

The Social Workers' Room at the Dalkeith Medical Centre has been of great value—Miss Gilroy is at the Centre or visiting in that locality on Tuesdays and Thursdays. This has meant that office interviews are possible there and people know when they can contact the Social Workers in Dalkeith.

Miss Wedderburn has been participating in a most interesting development at Livingston New Town. A meeting was held last May there to discuss the Social Services needed and it was agreed that, meantime, Miss Wedderburn should spend one afternoon per week in the New Town. She is available for office interviews on a Tuesday afternoon in the Nurses' Room at Riverside Primary School and can undertake home visits in the area there too. Close and friendly liaison has been maintained throughout with the Livingston New Town Corporation Officers and with the Clergy and Community Workers.

Miss Gilroy took part in the lectures given by staff of the Department to the Pupil Midwives at the Eastern General Hospital and also had a student from February to June from the Social Work Course at Moray House.

It would be impossible to say "Thank you" to everyone who has helped the Social Workers over the past year, but some must be mentioned—The Children's Department, the Health Visitors, the W.R.V.S. and S.S.A.F.A. to mention only two of all the Voluntary Societies—to you all the Social Workers owe a debt of gratitude for your co-operation and help.

WELFARE OF THE ELDERLY

Mr. Baker states :—

Register of the Elderly

The Register has increased as our activity, and as co-operation with various Social Work Groups in the County has extended, and block lists of names have become available from numerous Old People's Club Organisations. At the moment the Register stands at 2500 persons, many of whom are new to us and have not yet required the services of this Authority in the medical or social work sense.

Old People's Clubs

The Senior Welfare Officer continues to maintain active liaison with 37 Old People's Clubs and organisations in the County, and in this connection sends his monthly Newsletter to each Club, with copies of a Newsletter produced by the Scottish Council of Social Service, Old People's Welfare Committee, and numerous other publications which would be of interest to Clubs and Club Convenors.

Once again this Department is happy to be connected with the Training Scheme for Club Committee Members organised by the Scottish Council of Social Service and the Edinburgh University Extra-Mural Department. This year's Training Course was held once a fortnight in a clubhouse belonging to one of the Old People's Organisations and the Lecture Course consisted of an interesting series of lectures as indicated below :—

1. The National Health Service and the Older Citizen
2. The Community and the Older Citizen
3. The Family Doctor and the Older Citizen
4. Employment and the Older Citizen
5. Occupation and the Older Citizen
6. Group Discussion
7. Leadership and the Older Citizen
8. Clubs and the Older Citizen
9. Group Discussion
10. Summing up and Assessment of Course

The tremendous benefit and value of this type of Lecture Course is seen by the attendance figures, and most especially by the fact that

the same Club Convenors re-appear at each lecture for the opportunity of discussing their problems and, of learning more about how to aid the elderly and organise Club functions.

The ability of the Department to show full length feature films on its 16 millimetre projector and equipment has, naturally enough, been in some demand by various Clubs and Old People's Welfare Organisations, thus allowing us to continue to strengthen the bonds between the Local Authority and these Voluntary groups.

The proposed formation of a Midlothian Old People's Welfare Council is underway and the first preliminary meeting called by the Scottish Council of Social Service, who agreed to help with this project has been held.

Similarly, the Musselburgh Old People's Hall Committee have launched a project with the Scottish Council of Social Service to form a Musselburgh Committee of Co-ordination between the numerous voluntary organisations in their own area. A short time ago the Musselburgh Hall Committee organised its first Garden Fete, and at that time invited all other voluntary organisations in the area to participate. The response to their request was so overwhelming, that it seems natural that these groups should come together more often and with a continuing purpose for all round co-ordination of their activities. It is extremely interesting for us to be instrumental in the formation of a County wide organisation for co-operation, and a large town organisation for a similar purpose being together. We watch with great interest these two new ventures and trust that their success will be unlimited.

It is, perhaps, appropriate to mention at this point that a not dissimilar group is being formed among social workers in all fields, including the church and voluntary organisations in the Livingston New Town Area. The purpose and function of this group is to bring interested persons and organisations together occasionally, to hear experienced speakers on subjects of common interest and most especially to act together to encourage the formation in a new town of voluntary groups which the community will, no doubt, desire.

The department, continuing its all out thrust for understanding and co-operation with other social work organisations has written to every church within the administrative area of the County, irrespective of denomination, telling of the department's work and function, in order to keep others in touch with our activities and to invite co-ordination between us.

Luncheon Clubs

Because of the continued enthusiasm of club convenors and elderly club members, to say nothing of numerous voluntary organisations which send volunteers to the clubs, the Luncheon Clubs have continued to serve meals five days per week.

Following hard on the heels of our promotion of the six Luncheon Clubs for the Elderly, three other groups were lined up and ready to start as Luncheon Clubs, but we regret to state that at the last

moment two of them decided that their members did not want to participate.

Evidence of the value of Luncheon Clubs is well known, but I give below details of the six clubs at present operating showing the number of meals issued to them during the year in question :—

Luncheon Club	Service	No. of Meals Issued	
Musselburgh Old People's Club	5 days per week	6,476	
Dalkeith Old People's Club	5 days per week	10,450	
Bonnyrigg Old People's Club	5 days per week	3,634	
Pumpherston Old People's Club	5 days per week	9,842	
Newtongrange (W.R.V.S.) Darby and Joan Club	5 days per week	6,172	
Easthouses (W.R.V.S.)	5 days per week	2,094	
			38,668
Training Centres			
Whitehill		6,663	
Wilkieston		3,660	
			10,323
			<u>48,991</u>

Meals on Wheels Service

Once again, thanks to the magnificent voluntary effort that aids this service, we have given an almost complete County coverage so that hundreds of lonely, housebound and sick elderly persons have received the attention of a kindly visitor, five days per week, and received excellent meals besides. We are duty bound to thank those exceptional ladies of the Women's Royal Voluntary Service who help so well and remain so cheerful in all weathers. The meals still cost 1 shilling only, and from the very small number of complaints we are satisfied that it would be difficult to produce a better service than at present. We are almost certain that an entire and complete County coverage of this service will be completed in 1968, and give below the details of the service to date :—

Area	Number of meals supplied during the year
Musselburgh	11,251
Wallyford	
Whitecraig	
Danderhall	
Currie	7,786
Balerno	
Ratho	
Ratho Station	
Newbridge	12,359
East Calder	
Kirknewton	
Mid Calder	
Pumpherston	14,850
Polbeth	
Bellsquarry	
West Calder	
Addiewell	

Bonnyrigg	}	
Lasswade		
Poltonhall		
Rosewell		28,763
Easthouses		
Mayfield		
Newtongrange		
Dalkeith		
Gorebridge (commenced 23/10/67)		257
Penicuik (commenced 9/10/67)		1,289
Loanhead (commenced 16/10/67)		1,611
		<hr/>
		78,166
		<hr/>

The only areas outstanding and requiring our attention with regard to the Meals on Wheels Service are Pathhead, Temple, Heriot and Stow. When these areas are covered in 1968 the entire County will be completely catered for so far as Meals on Wheels Services are concerned. There are, no doubt one or two outlying areas that may need our attention from time to time, but these isolated farms will be attended to as and when the need is shown.

To conclude, if we add the figure of 48,991 meals issued to Luncheon Clubs for the Elderly and Training Centres for the Disabled to 78,166 meals served by our Meals on Wheels Service, there is a grand total of 127,157 meals provided during the year. A truly splendid record of local authority and voluntary bodies co-operating together for a common purpose—the wellbeing of so many.

Chiropody Service

This is carried on by the Midlothian Branch of the British Red Cross Society for the benefit of old age pensioners. A charge of 2s. per clinic visit and 4s. per domiciliary visit is made, the deficit being met by the Society, assisted by a grant from the County Council.

The following clinics are held :

1. Bonnyrigg—Health Services Clinic, Main Street. Thursday, 2 p.m. to 5 p.m.
2. Carrington/Temple—Mobile from Gorebridge.
3. Currie/Balerno—Memorial Hall. Tuesday, 2 p.m. to 5 p.m.
4. Dalkeith—Medical Centre, St Andrew Street. Tuesday, 10 a.m. to 12 noon ; 1 p.m. to 4 p.m.
5. Danderhall—Clinic, Danderhall School. Monday, 2 p.m. to 5 p.m.
6. East Calder and Mid Calder—Combined Purposes Clinic, East Calder. Monday, 2 p.m. to 5 p.m.
7. Easthouses—Clinic, Mayfield/St Luke's Primary School. Monday, 1 p.m. to 4 p.m.
8. Gorebridge—Clinic, Gorebridge School, Monday, 2 p.m. to 5 p.m.
9. Loanhead—Health Services Clinic, George Terrace. Thursday, 2 p.m. to 5 p.m.
10. Musselburgh—Clinic, Fisherrow School. Wednesday, 10 a.m. to 12 noon, and Friday, 2 p.m. to 5 p.m.
11. Newbridge—Village Hall. Wednesday, 2 p.m. to 5 p.m.
12. Newtongrange—Clinic, Newtongrange School. Friday, 2 p.m. to 5 p.m.
13. Penicuik—Clinic, High School. Tuesday, 1 p.m. to 4 p.m.
14. Polbeth—Combined Purposes Clinic. Tuesday, 1 p.m. to 4 p.m.
15. West Calder—Combined Purposes Clinic, Stewart Street. Tuesday, 10 a.m. to 12 noon and 2 p.m. to 5 p.m.

The following statement has been submitted for the year to 31st December, 1967 :

Centres							Treatments	
							Clinic	Domiciliary
Bonnyrigg	...	...	...	...	...	...	437	134
Currie/Balerno	...	...	...	...	...	...	293	48
Dalkeith	...	...	...	...	...	...	735	—
Danderhall	...	...	...	...	...	...	200	—
East Calder and Mid Calder	...	...	...	...	...	...	592	9
Easthouses	...	...	...	...	...	...	438	180
Loanhead	...	...	...	...	...	...	447	118
Musselburgh	...	...	...	...	...	...	967	299
Newbridge	...	...	...	...	...	...	267	94
Pathhead Ford	...	...	...	...	...	...	218	157
Penicuik	...	...	...	...	...	...	636	29
West Calder	...	...	...	...	...	...	447	148
Newtongrange	...	...	...	...	...	...	411	—
Gorebridge	...	...	...	...	...	...	350	181
Gala Water	...	...	...	...	...	...	204	40
Polbeth	...	...	...	...	...	...	384	—
Limefield House	...	...	...	...	...	134		
Newtonloan Lodge	...	...	...	...	...	100		
Westfield Park	...	...	...	...	...	152		
Wedderburn House	...	...	...	...	...	83		
St Anne's Convent, Musselburgh	...	...	...	...	...	69		
							538	
							7564	1437

Domestic Help Scheme

The Domestic Help Service continues to play an ever increasingly important role, particularly in aiding the aged persons to continue to live in their own homes, even when infirmity might otherwise have meant them going into a hospital or Eventide Home. It is not always realised how large a part of the Home Help Service is devoted to the care of the elderly—in Midlothian this amounts to approximately 90 per cent. of the annual total of 259,950 hours of work. The figures shown below give a complete picture.

					Part-time	Whole-time Equivalent
Organisers	...	...	...	...	10	3
Home Helps	...	...	...	...	457	124
Night Attendants	...	...	...	...	4	—
Help given to persons :—						No. of Cases
Aged 65 or over	...	...	...	...	...	530
Under 65 years Chronic Sick	...	...	...	...	...	69
Mentally disordered	...	...	...	...	...	6
Maternity	...	...	...	...	...	25
Others...	...	...	...	...	...	26
						656

(All Domestic Helps are X-rayed before appointment)

No arrangements exist in Midlothian for the training of Home Helps which has now become most necessary, and this Authority will shortly have to provide a training course of probably two weeks duration and release Home Helps for such service training probably one day per week. Obviously, all Home Helps employed by this Authority would benefit from instruction, and such system must be evolved under which each Home Help receives adequate training to fit them for the task in hand.

We are also aware of the need to devise a system of neighbourhood help, which would benefit those patients who need some attendance, who are ill and at home alone or with an aged wife or husband, and to benefit those relatives, since they cannot go out to work themselves, who have given regular attendance to their relations, by the payment of a small sum to them so that they might be encouraged to continue giving care. The problem does arise in a rural area where no Home Helps are immediately available, and such a scheme whilst benefiting the recipient, would not cost a great deal of money to the Authority. Numerous schemes of this type are already in operation throughout Great Britain, and prove of tremendous help to all concerned. Such a scheme is both wise and less costly than the admission of a person to hospital or Eventide Home.

Emergency Assistance Alarms

We continue to issue Emergency Alarms to those elderly persons in need, free of charge, which can be operated from the mains supply or a powered battery. The value of these alarms is not readily seen, but there is no doubt that one in the house gives a great deal of confidence to an elderly frail person and encourages them to remain in their own house that much longer than perhaps they normally would stay. The alarm system used consists of three press switches which are placed in ideal locations within the house, and they are connected to a bell which is placed outside the house and gives ample warning if help is required. Naturally enough these alarms are fitted with the co-operation of the elderly person and his or her neighbours who agree to assist should the alarm be rung at any time. Eight alarms were supplied during the year making the total number supplied and fitted free of charge to be 38 in all.

RESIDENTIAL ACCOMMODATION

Homes for the Elderly

There were no major changes in the homes during the year.

The influenza epidemic of last year was not repeated and although Winter and Spring took their toll only 10 persons were taken in for temporary periods to allow relatives a holiday.

Limefield House, West Calder

				Men	Women	Total
Accommodation	...	...	...	18	13	31
In residence at 31/12/66	...	...	...	18	13	31
Admitted during 1967	...	...	...	3	6	9
Died during 1967	...	...	...	1	—	1
Discharged during 1967	...	...	...	2	6	8
Remaining at 31/12/67	...	...	...	18	13	31
<hr/>						
Average number during the year	...	...	...			31
Highest number during the year	...	...	...			31
Lowest number during the year	...	...	...			29

Newtonloan Lodge, Gorebridge

				Men	Women	Total
Accommodation	...	...	...	10	14	24
In residence at 31/12/66	...	...	...	10	14	24
Admitted during 1967	...	...	...	2	3	5
Died during 1967	...	...	...	1	2	3
Discharged during 1967	...	...	...	2	—	2
Remaining at 31/12/67	...	...	...	9	15	24
<hr/>						
Average number during the year	...	...	...			24
Highest number during the year	...	...	...			25
Lowest number during the year	...	...	...			22

Westfield Park Home, Dalkeith

				Men	Women	Total
Accommodation	...	...	...	26	25	51
In residence at 31/12/66	...	...	...	27	25	52
Admitted during 1967	...	...	...	6	7	13
Died during 1967	...	...	...	5	3	8
Discharged during 1967	...	...	...	2	4	6
Remaining at 31/12/67	...	...	...	26	25	51
<hr/>						
Average number during the year	...	...	...			51
Highest number during the year	...	...	...			52
Lowest number during the year	...	...	...			48

Wedderburn House, Musselburgh (jointly with East Lothian)

					Men		Women		Total		
Accommodation	...	...	...	...	17		31		48	
					Mid	East	Mid	East	Mid	East	
In residence at 31/12/66	...	...	...	...	11	3	25	5	36	8
Admitted during 1967	...	...	...	...	14	1	14	—	28	1
Died during 1967	...	...	...	...	4	—	3	—	7	—
Discharged during 1967	...	...	...	...	9	—	9	1	18	1
Remaining at 31/12/67	...	...	...	...	12	4	27	4	39	8
<hr/>											
Average number during the year				...							46
Highest number during the year				...							48
Lowest number during the year				...							42

The age distribution of residents as at 31/12/67 was as follows :

Home	Under								
	60	60/65	66/70	71/75	76/80	81/85	86/90	90+	
Males—									
Limfield House	...	—	1	2	—	6	6	3	—
Newtonloan Lodge	...	1	—	3	2	1	2	1	—
Westfield Park	—	2	2	3	9	7	3	—
Wedderburn House	...	1	2	1	4	4	2	2	—
Females—									
Limfield House	...	—	1	—	3	2	2	4	1
Newtonloan Lodge	...	—	1	1	2	4	2	4	—
Westfield Park	4	2	1	3	4	6	3	2
Wedderburn House	...	8	2	5	—	8	5	—	3

The County Council were responsible at the end of the year for payment of supplementation in the case of 17 old people in Voluntary Homes as follows :—

Church of Scotland Homes	...	...	...	...	10
Salvation Army Home	...	...	...	...	2
Machermore Castle Home	...	...	...	...	1
St Margaret's Convent and Home...	...	...	...	...	1
Poplars Home, Aberlady	...	...	...	...	1
Holly Lodge, Edinburgh	...	...	...	...	1
St John's Hospice	...	...	...	...	1

In addition to the above there are two old people resident in Homes run by other Authorities, i.e.

Windsor Home, Falkirk	...	...	...	...	...	1
Morton House, King's Worthy, Hampshire	...	...	...	...	...	1

Registration and Inspection of Private Residential Homes

The following Homes were registered and subject to inspection:

St John's Hospice, Carberry, Musselburgh	...	...	...	12
Mayburn Eventide Home, Loanhead	...	...	...	38
St Anne's Convent, Windsor Gardens, Musselburgh	...	...	...	30

St Anne's Convent was registered as an Old People's Home during the year and Roydene, 14, Hope Place Levenhall, Musselburgh, ceased to be registered during the year.

All Homes were inspected by the Senior Assistant Medical Officer.

Holiday Homes—Lauderdale House, Dunbar

Fourteen trainees from Whitehill and Wilkieston Training Centres were given a week's holiday at Dunbar. The main arrangements were made through the Scottish Association for Mental Health, with the Esk Valley Branch of the Association assisting financially. The holiday was much appreciated and it is hoped to arrange for a larger number to attend next year.

Red Cross Holidays for Physically Handicapped

The Red Cross holidays are proving increasingly popular and King's Knoll, North Berwick, is now open for the whole year, except for six weeks in January and February.

Eleven persons attended King's Knoll and five attended Rosehearty Hotel, Nairn, under the sponsorship of the County Council.

Temporary Protection of Property

The Health and Welfare Committee is responsible under Section 48 of the National Assistance Act, 1948 for the protection of removable property belonging to persons admitted to hospital or residential accommodation where it appears that there is a danger of loss or damage and no other suitable arrangements have been made. During the year under review 3 cases were dealt with.

Compulsory Removal

The Committee is responsible under Section 47 of the National Assistance Act, 1948 to secure compulsory removal to hospital or other accommodation of persons suffering from grave chronic disease, infirmity or physical incapacity and who are living in insanitary conditions and not receiving proper care and attention. No case has been dealt with under this Section of the Act during the year.

Burial and Cremation of the Dead

Arrangements were made with local funeral directors for the burial or cremation of seven persons who died during the year in the administrative area of the County, where no suitable arrangements had been made or were being made.

REGISTRATION OF NURSING HOMES

There is one registered Nursing Home in the County.

	Beds	Type of Case
Health Hydros Ltd., Inveresk House, Musselburgh ...	8	Hydro Treatment

SCHOOL HEALTH SERVICE

The Report on the School Health Service is issued separately.

PORT HEALTH ADMINISTRATION

No work was necessary during the year under this Section.

FOOD SUPPLY

This is dealt with fully in the Annual Report by the County Sanitary Inspector.

GENERAL SANITATION

This is dealt with fully in the Annual Report by the County Sanitary Inspector.

FACTORIES ACT, 1961

		No. on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authority—					
Bonnyrigg and Lasswade	...	1	—	—	—
Dalkeith	... ..	—	—	—	—
Loanhead	... ..	1	1	—	—
Musselburgh	... ..	1	1	—	—
Penicuik	... ..	—	—	—	—
Landward	... ..	11	5	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority—					
Bonnyrigg and Lasswade	...	13	12	—	—
Dalkeith	... ..	42	42	—	—
Loanhead	... ..	13	14	—	—
Musselburgh	... ..	73	63	7	—
Penicuik	... ..	24	28	—	—
Landward	... ..	178	89	5	—
(iii) Other Premises in which Section 7 is enforced by Local Authority (excluding out-workers)—					
Bonnyrigg and Lasswade	...	7	12	—	—
Dalkeith	... ..	7	7	—	—
Loanhead	... ..	—	—	—	—
Musselburgh	... ..	3	3	—	—
Penicuik	... ..	2	2	—	—
Landward	... ..	33	19	—	—

Area	Particulars	Found	Remedied	No. of cases where defects found Referred		Prosecutions
				To H.M. Inspector	By H.M. Inspector	
Dalkeith	Sanitary Conveniences— Unsuitable or defective	—	—	—	3	—
Loanhead	Sanitary Conveniences— Unsuitable or defective	1	1	—	—	—
Musselburgh	Sanitary Conveniences— Want of Cleanliness	6	5	—	—	—
	Unreasonable temperature	1	1	—	—	—
Penicuik	Sanitary Conveniences— Unsuitable or defective	1	1	—	—	—
	Want of Cleanliness	5	4	—	—	—
Landward	Sanitary Conveniences— Insufficient ...	4	2	—	—	—
	Unsuitable or defective	9	5	—	—	—

OUTWORK

Area	Nature of Work	Section 133		Section 134			
		No. of out-workers in August List required by Section 133 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Penicuik	Curtains and furniture hangings ...	1	—	—	—	—	—
	Furniture and upholstery ...	1	—	—	—	—	—

HOUSING

334 medical certificates were “pointed” during the year.

Area	Uninhabitable houses closed during year	Houses built and occupied during year		Additional houses following	
		Local Authority	Private	Scottish Housing Assoc.	Special Conversion
Bonnyrigg and Lasswade	3	24	10	—	1
Dalkeith	—	26	17	—	—
Loanhead	—	42	4	—	5
Musselburgh	57	283	65	—	—
Penicuik	43	—	47	6	—
Landward	50	125	203	—	—
Total	153	500	346	6	6

